## 2002 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# N01000009017

Entity Name: LUTHER CAMPBELL CHARITABLE FOUNDATION, INC., II

FILED Apr 29, 2002 8:00 AM Secretary of State

Current Principal Place of Business: 231 12TH STREET			New Princi	New Principal Place of Business:	
MIAMI BEACH, FL 33139					
Current Mailing Address:			New Mailin	New Mailing Address:	
231 12TH STREET MIAMI BEACH, FL 33139					
FEI Number: 65-1153540 FEI Number Applied For ( ) FEI Nu		FEI Number Not Appli	cable ( ) Certificate of Status Desired ( )		
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
DBM LIMITED, INC. 356 W. 46TH STREET #1					
MIAMI BEACH, FL 33140 US					
The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.					
SIGNATURE:					
	Electronic	Signature of Registered Agent		Date	
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () CAMPBELL, LUT 231 12TH STREE MIAMI BEACH, F	ET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	V () C CAMPBELL, STA 231 12TH STREE MIAMI BEACH, F	ET	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	S () E MOORE, DONNA 231 12TH STREE MIAMI BEACH, F	ET	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	()[	Delete	Title: Name: Address: City-St-Zip:	T () Change (X) Addition DBM LIMITED, INC., 231 12TH STREET MIAMI BEACH, FL 33139	
Title: Name: Address: City-St-Zip:	()[	Delete	Title: Name: Address: City-St-Zip:	T () Change (X) Addition CAMPBELL, YVONNE 231 12TH STREET MIAMI BEACH, FL 33139	
Title: Name: Address: City-St-Zip:	()[	Delete	Title: Name: Address: City-St-Zip:	T () Change (X) Addition NEWBOLD, HARRY 231 12TH STREET MIAMI BEACH, FL 33139	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LUTHER CAMPBELL P 04/29/2002