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May 19 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS**DOCUMENT # N37298 (9)**

1. Corporation Name

SUNSHINE FESTIVAL FOOTBALL, INC.

Principal Place of Business

Mailing Address

915 MIDDLE RIVER DR
STE 120
FT LAUDERDALE FL 33304
US915 MIDDLE RIVER DR
STE 120
FT LAUDERDALE FL 33304-3559
US3. Date Incorporated or Qualified
03/23/19903a. Date of Last Report
05/01/1996

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MORRALL, MATTHEW E.
2455 E. SUNRISE BLVD.
PENTHOUSE, WEST
FT. LAUDERDALE FL 33304

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE
NAME SD
STREET ADDRESS MORRALL, MATTHEW E.
CITY-ST-ZIP 2455 E SUNRISE BLVD P#W
FT LAUDERDALE FL1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIPTITLE ☒ DELETE
NAME D
STREET ADDRESS RAY, DEE
CITY-ST-ZIP 801 E TRADE ST
CHARLOTTE NC2.1 TITLE ☒ Change ☐ Addition
2.2 NAME D
2.3 STREET ADDRESS Earl Morrall
2.4 CITY-ST-ZIP 915 Middle River Drive
Ft. Lauderdale, FL 33302TITLE ☒ DELETE
NAME PTD
STREET ADDRESS RAY, WILLIAM E.
CITY-ST-ZIP 412 EAST BLVD.
CHARLOTTE NC3.1 TITLE ☒ Change ☐ Addition
3.2 NAME P
3.3 STREET ADDRESS Brian Flajole
3.4 CITY-ST-ZIP 915 Middle River Drive
Ft. Lauderdale, FL 33302TITLE ☒ DELETE
NAME V
STREET ADDRESS WARREN, RAYMOND
CITY-ST-ZIP 500 5TH AVE.
NEW YORK NY4.1 TITLE ☒ Change ☐ Addition
4.2 NAME T
4.3 STREET ADDRESS Raymond Warren
4.4 CITY-ST-ZIP 500 5th Ave.
New York, NYTITLE ☐ DELETE
NAME D
STREET ADDRESS HAINES, KEN
CITY-ST-ZIP 801 E. TRADE ST
CHARLOTTE NC5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIPTITLE ☒ DELETE
NAME D
STREET ADDRESS MILLSAPS JOSEPH RAUCH WEAVER & MILLSAPS
CITY-ST-ZIP 871 E COMMERCIAL BLVD
FT LAUDERDALE FL6.1 TITLE ☒ Change ☐ Addition
6.2 NAME D
6.3 STREET ADDRESS Charlie Frankel
6.4 CITY-ST-ZIP 915 Middle River Drive
Ft. Lauderdale, FL 33302

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed or on an attachment with an address.

SIGNATURE:

Raymond Warren 04-29-97

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 0035590

CP2E037 (9/96)