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Jan 23 1997 8:00am  
Secretary of StateNONPROFIT  
CORPORATION  
ANNUAL REPORT  
1997FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # N37889 (5)

1. Corporation Name

DON SHULA FOUNDATION, INC.

Principal Place of Business

Mailing Address

% CHARLES O. MORGAN, JR.  
1300 N.W. 167TH ST.  
MIAMI FL 33169% CHARLES O. MORGAN, JR.  
1300 N.W. 167TH ST.  
MIAMI FL 33169-57383. Date Incorporated or Qualified  
04/30/19903a. Date of Last Report  
02/26/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City &amp; State

27 City &amp; State

24 Zip 25 Country

29 Zip 30 Country

4. FEI Number

65-0192721

Applied For  
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required6. Election Campaign Financing  
Trust Fund Contribution\$5.00 May Be  
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MORGAN, CHARLES O JR  
1300 N.W. 167TH ST  
MIAMI FL 33169

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 firm, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE S  
NAME HORTON, LAURA M.  
STREET ADDRESS 1300 N.W. 167TH ST.  
CITY-ST-ZIP MIAMI FL 331691.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIPTITLE T  
NAME STANTON, WILLIAM  
STREET ADDRESS 3041 WEST LANE KEYS  
CITY-ST-ZIP WASHINGTON DC 200072.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIPTITLE EDT  
NAME MORGAN, CHARLES O JR  
STREET ADDRESS 1300 N.W. 167TH ST.  
CITY-ST-ZIP MIAMI FL 331693.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIPTITLE TT  
NAME HOGUE, CHARLES  
STREET ADDRESS 5401 N. 38TH COURT  
CITY-ST-ZIP HOLLYWOOD FL 330214.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIPTITLE PT  
NAME SHULA, DONALD F  
STREET ADDRESS 16 INDIAN CREEK ISLAND  
CITY-ST-ZIP MIAMI BEACH FL5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIPTITLE VT  
NAME SHULA, MICHAEL  
STREET ADDRESS 242 BRAXTON WAY  
CITY-ST-ZIP GRAYSLAKE IL6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

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:

Signature AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/9/97

(305) 624-0011

Date

Daytime Phone # 0032392

CR2E037 (9/96)