FILE NOW: FILING FEE IS \$61.25

CITY-\$T-ZIP

SIGNATURE:

FILED **NONPROFIT** Mar 06 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 **POCUMENT #** N37889 (5) DON SHULA FOUNDATION, INC. Principal Place of Business Mailing Address % CHARLES O. MORGAN, JR. % CHARLES O. MORGAN, JR. 3. Date incorporated or Qualified 1300 N.W. 167TH ST. 1300 N.W. 167TH ST. 04/30/1990 MIAMI FL 33169 **MIAMI FL 33169** 4. FEI Number Applied For 65-0192721 Not Applicable 2. Principal Place of Business 2a. Mailing Address \$8.75 Additional 5. Certificate of Status Desired 21 Fee Required Suite, Apt. #, etc. Suite, Apt. #, etc. 6. Election Campaign Financing \$5.00 May Be 22 27 Trust Fund Contribution Added to Fees City & State City & State 7. Is this nonprofit corporation a homeowners association? Yes No 23 28 Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 Personal Property Tax due June 30. Yes 25 29 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent MORGAN, CHARLES O JR Street Address (P.O. Box Number is Not Acceptable) 82 1300 N.W. 167TH ST **R**3 **MIAMI FL 33169** City Zip Code 11. Pursuant to the provisions of Sections 617.0502 and 617.1503, 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 regulred when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE Change Addition TITLE 11 TITLE NAME HORTON, LAURA M. 1.2 NAME 1300 N.W. 167TH ST. STREET ADDRESS 1.3 STREET ADDRESS **MIAMI FL 33169** CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE STANTON, WILLIAM NAME 2.2 NAME 3041 WEST LANE KEYS STREET ADDRESS 2.3 STREET ADDRESS WASHINGTON DC 20007 CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE MORGAN, CHARLES O JR NAME 3.2 NAME 1300 N.W. 167TH ST. STREET ADDRESS 3.3 STREET ADDRESS **MIAMI FL 33169** 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE **HOGUE, CHARLES** NAME A 2 NAME **5811 KENTUCKY DERBY** STREET ADDRESS 4.3 STREET ADDRESS **AUSTIN TX** 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Addition Change TITLE 5.1 TITLE SHULA, DONALD F 5.2 NAME NAME STREET ADDRESS **16 INDIAN CREEK ISLAND 5.3 STREET ADDRESS** CITY-ST-ZIP MIAMI BEACH FL 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE SHULA. MICHAEL 6.2 NAME TAMPA BAY BUCCANEERS 242 BRAXTON WAY STREET ADDRESS 6.3 STREET ADDRESS TAMPA FL

6.4 CITY-ST-ZIP

2/26/48

I 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 of the receiver or trusted empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changes of on an attachment with an address.

SIGNATURE: