

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 15, 2001 8:00 am
Secretary of State

03-15-2001 90207 039 ****61.25

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DOCUMENT # N95000000159

1. Entity Name

DOLPHINETTES OF MIAMI BOOSTERS, INC.

Principal Place of Business

Mailing Address

7285 SW 130TH ST
 MIAMI FL 33156
 US

7285 SW 130TH ST
 MIAMI FL 33156
 US

2. Principal Place of Business

14704 SW 83 Ct

3. Mailing Address

14704 SW 83 Ct

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Miami, FL

City & State

Miami, FL

4. FEI Number

65-0549906

Applied For

Not Applicable

Zip

33156

Country

USA

Zip

33156

Country

USA

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BLEIBERG, ELAINE
 7285 SW 130TH ST
 MIAMI FL 33156

7. Name and Address of New Registered Agent

Name
Nancy Anderson
 Street Address (P.O. Box Number is Not Acceptable)
 14704 SW 83 Ct
 City
Miami FL Zip Code
33156

8. 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

Nancy L Anderson

2/20/01

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
SEE IS \$61.25

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Delete
DP	BLEIBERG, ELAINE	7285 SW 130TH ST	MIAMI FL 33156	<input checked="" type="checkbox"/>
DV	KELLY, DARLENE	7855 SW 148TH ST	MIAMI FL 33158	<input checked="" type="checkbox"/>
DT	BROTHERTON, JUDY	14965 SW 86TH AVE	MIAMI FL 33158	<input checked="" type="checkbox"/>
S	CALANCIE, LORI	15700 SW 75TH AVE	MIAMI FL 33157	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
DP	Nancy Anderson	14704 SW 83 Ct	Miami, FL 33156	<input checked="" type="checkbox"/>	<input type="checkbox"/>
DV	Marci Siegel	27 Tahiti Bch Island Rd.	Coral Gables, FL 33143	<input checked="" type="checkbox"/>	<input type="checkbox"/>
DT	Carla Kury	14741 SW 83 Ct	Miami, FL 33156	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Nancy L Anderson

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/20/01 305.235.4662

Date Daytime Phone #

CR2E037 (10/00)