

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 20 1997 8:00am
Secretary of State

DOCUMENT # N96000005967 (2)

1. Corporation Name

SOUTH FLORIDA SUPER BOWL XXXIII HOST COMMITTEE,
INC.

Principal Place of Business

Mailing Address

ATTENTION: GREGORY ST. JOHN
SUITE 1600, 2601 SOUTH BAYSHORE DRIVE
MIAMI FL 33133

ATTENTION: GREGORY ST. JOHN
SUITE 1600, 2601 SOUTH BAYSHORE DRIVE
MIAMI FL 33133-5413



2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

11/21/1996

3a. Date of Last Report

N/A

4. FEI Number

☒ Applied For
☐ Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐ Yes ☒ No

10. Name and Address of New Registered Agent

AZ REGISTERED AGENT CORPORATION
SUITE 1600
2601 SOUTH BAYSHORE DRIVE
MIAMI FL 33133

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

TITLE	Chairman / Director	<input type="checkbox"/> DELETE
NAME	Henry A. Adorno	
STREET ADDRESS	2601 S. Bayshore Dr. #1600	
CITY-ST-ZIP	MIAMI, FL 33133	
TITLE	Executive Director	<input type="checkbox"/> DELETE
NAME	Sergio Gonzalez	
STREET ADDRESS	2601 S. Bayshore Dr. #750	
CITY-ST-ZIP	MIAMI, FL 33133	
TITLE	Treasurer / Director	<input type="checkbox"/> DELETE
NAME	William Tillet	
STREET ADDRESS	200 S. Biscayne Blvd #1900	
CITY-ST-ZIP	MIAMI, FL 33131	
TITLE	Secretary / Director	<input type="checkbox"/> DELETE
NAME	Elaine H. Black	
STREET ADDRESS	6255 NW 7th Ave.	
CITY-ST-ZIP	MIAMI, FL 33147	
TITLE	Vice President / Director	<input type="checkbox"/> DELETE
NAME	Nicki Grossman	
STREET ADDRESS	1850 Eller Drive Suite 303	
CITY-ST-ZIP	FT. LAUDERDALE, FL 33316	
TITLE	Vice President / Director	<input type="checkbox"/> DELETE
NAME	Merrett Sherman	
STREET ADDRESS	701 Brickell Avenue # 2700	
CITY-ST-ZIP	MIAMI, FL 33131	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	Vice President / Director	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	Mac McLaughlin	
1.3 STREET ADDRESS	1555 Palm Beach Lakes Blvd. Suite 204	
1.4 CITY-ST-ZIP	West Palm Beach, FL 33401	
2.1 TITLE	Chairman - Dade County	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	Rodney Barreto	
2.3 STREET ADDRESS	300 Biscayne Blvd Way Suite 303	
2.4 CITY-ST-ZIP	MIAMI, FL 33131	
3.1 TITLE	Chairman - Broward County	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	Jon Gustafson	
3.3 STREET ADDRESS	One E. Broward Blvd P.O. Box 14070	
3.4 CITY-ST-ZIP	FT. LAUDERDALE, FL 33302	
4.1 TITLE	Chairman - Palm Beach County	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	Richard Ellington	
4.3 STREET ADDRESS	701 U.S. Highway 1, Suite 402	
4.4 CITY-ST-ZIP	N. Palm Beach, FL 33408	
5.1 TITLE	Co-Chairman, Palm Beach City	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	David McIntosh	
5.3 STREET ADDRESS	777 S. Flagler Dr. #500 East	
5.4 CITY-ST-ZIP	W. Palm Bch, FL 33401	
6.1 TITLE	Dean Olson	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	Immediate Past Chairman	
6.3 STREET ADDRESS	200 S. Biscayne Blvd #4700	
6.4 CITY-ST-ZIP	MIAMI, FL 33131	

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, on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/5/97

Date

(305) 860-7290

Daytime Phone # 0026719

CR2E037 (9/96)