

2001 UNIFORM BUSINESS REPORT (UBR)**FILED****Sep 06, 2001 08:00 AM**
Secretary of State**DOCUMENT # N98000003702****1. Entity Name**
ORANGE BOWL FOUNDATION, INC.

Principal Place of Business	Mailing Address
601 BRICKELL KEY DRIVE #206	601 BRICKELL KEY DRIVE #206
MIAMI FL 33131	MIAMI FL 33131

2. Principal Place of Business	3. Mailing Address
601 BRICKELL KEY DRIVE	601 BRICKELL KEY DRIVE

Suite, Apt. #, etc.	Suite, Apt. #, etc.
SUITE 206	SUITE 206

City & State	City & State
MIAMI FL	MIAMI FL

Zip	Country	Zip	Country
33131		33131	

4. FEI Number	Applied For
65-0853393	Not Applicable

5. Certificate of Status Desired	<input checked="" type="checkbox"/> \$8.75 Additional Fee Required
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DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

TRIBBLE KEITH
601 BRICKELL KEY DRIVE #206

MIAMI FL 33131 US

7. Name and Address of New Registered Agent

Name
TRIBBLE KEITH RMR.
Street Address (P.O. Box Number is Not Acceptable)
601 BRICKELL KEY DRIVE
SUITE 206
City MIAMI FL Zip Code 33131

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 LESLIE PANTIN, JR.****09/06/2001**

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

(NOTE: Registered Agent signature required when reinstalling)

DATE

FILE NOW:
FEE 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**

TITLE	D <input type="checkbox"/> Delete
NAME	TRIBBLE KEITH
STREET ADDRESS	601 BRICKELL KEY DRIVE #206
CITY-ST-ZIP	MIAMI FL 33131
TITLE	D <input type="checkbox"/> Delete
NAME	NORTON SUSAN
STREET ADDRESS	601 BRICKELL KEY DRIVE #206
CITY-ST-ZIP	MIAMI FL 33131
TITLE	D <input type="checkbox"/> Delete
NAME	SCRUGGS FRANK
STREET ADDRESS	601 BRICKELL KEY DRIVE #206
CITY-ST-ZIP	MIAMI FL 33131
TITLE	D <input type="checkbox"/> Delete
NAME	HUDSON SHERRILL
STREET ADDRESS	601 BRICKELL KEY DRIVE #206
CITY-ST-ZIP	MIAMI FL 33131
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GRAHAM YOUNTS SANDRA
STREET ADDRESS	601 BRICKELL KEY DRIVE #206
CITY-ST-ZIP	MIAMI FL 33131
TITLE	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MOORE NATHANIEL
STREET ADDRESS	601 BRICKELL KEY DRIVE #206
CITY-ST-ZIP	MIAMI FL 33131
TITLE	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MOORE MICHAEL
STREET ADDRESS	601 BRICKELL KEY DRIVE #206
CITY-ST-ZIP	MIAMI FL 33131
TITLE	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PANTIN, JR LESLIE
STREET ADDRESS	601 BRICKELL KEY DRIVE #206
CITY-ST-ZIP	MIAMI FL 33131
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:**

Leslie Pantin, Jr.

Mr.

09/06/2001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (11/00)