2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 22, 2002 8:00 AM
Secretary of State

DOCUMENT# N99000000359

Entity Name: FLORIDA MARLINS COMMUNITY FOUNDATION, INC.

Current Principal Place of Business:

2267 N.W. 199TH ST.
MIAMI, FL 33056

New Principal Place of Business:

Current Mailing Address:

2267 N.W. 199TH ST.
MIAMI, FL 33056

New Mailing Address:

FEI Number: 65-0912375 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. PINE ISLAND RD.
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: HENRY, JOHN W
Address: FLORIDA MARLINS, 2267 N.W. 199TH ST.
City-St-Zip: MIAMI, FL 33056

Title: D ( ) Delete
Name: KOSHI, KEVIN
Address: C/O JOHN W. HENRY, 2267 N.W. 199TH ST.
City-St-Zip: MIAMI, FL 33056

Title: D ( ) Delete
Name: FLORES, DOM
Address: C/O JOHN W. HENRY, 2267 N.W. 199TH ST.
City-St-Zip: MIAMI, FL 33056

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: SAMSON, DAVID P
Address: FLORIDA MARLINS, 2267 N.W. 199TH ST.
City-St-Zip: MIAMI, FL 33056

Title: D (X) Change ( ) Addition
Name: MAEL, JOEL
Address: FLORIDA MARLINS, 2267 N.W. 199TH ST.
City-St-Zip: MIAMI, FL 33056

Title: D (X) Change ( ) Addition
Name: LOYELLO, PETER J
Address: FLORIDA MARLINS, 2267 N.W. 199TH ST.
City-St-Zip: MIAMI, FL 33056

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DAVID P. SAMSON D 04/22/2002

Electronic Signature of Signing Officer or Director — Date