

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N99000005654

1. Entity Name

MIAMI JAZZ FOUNDATION, INCORPORATED

FILED

01 SEP 17 PM 3:28

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
2699 SO. BAYSHORE DRIVE
SUITE 600C
MIAMI FL 33133

Mailing Address
2699 SO. BAYSHORE DRIVE
SUITE 600C
MIAMI FL 33133

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

05/23/01-90210-001-\$66.25

4. FEI Number 65-0970874

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

JOHNSON, ALBERT B II
3370 POINCIANA AVENUE
MIAMI FL 33133

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
After September 12, 2001, min. will be \$236.25

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
NAME JOHNSON, ALBERT B II
STREET ADDRESS 3370 POINCIANA AVENUE
CITY-ST-ZIP MIAMI FL 33133 ☐ Delete

TITLE D
NAME ADDERLY, THEOPHILUS C
STREET ADDRESS 18850 N.W. 14TH AVENUE ROAD
CITY-ST-ZIP MIAMI FL 33169 ☐ Delete

TITLE D
NAME KNOX, GEORGE F
STREET ADDRESS 3803 S.W. 37TH AVENUE
CITY-ST-ZIP MIAMI FL 33133 ☐ Delete

TITLE D
NAME WILLIAMS, EDDIE B JR.
STREET ADDRESS 2340 N.W. 155TH TERRACE
CITY-ST-ZIP MIAMI FL 33054 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE D
NAME KRANZ, SARAH S.
STREET ADDRESS 8261 SW 91ST STREET
CITY-ST-ZIP MIAMI, FL 33156 ☒ Change ☐ Addition

TITLE R
NAME RUBIN, JEFF E.
STREET ADDRESS 7604 SW 145TH TERRACE
CITY-ST-ZIP MIAMI, FL 33158 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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:

Signature Required Sept. 12, 2001

(305) 858-8545

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CR2E037 (5/01)