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PROFIT
CORPORATION
ANNUAL REPORT
1997



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

FILED

97 APR 30 AM 7:46

SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # P92000008428 (4)

1. Corporation Name

FLORIDA PANTHERS HOCKEY CLUB, INC.

Principal Place of Business

100 NE THIRD AVE.
10TH FLOOR
FT. LAUDERDALE FL 33301

Mailing Address

100 NE THIRD AVE.
10TH FLOOR
FT. LAUDERDALE FL 33301-1155

3. Date Incorporated or Qualified
12/02/1992

3a. Date of Last Report
08/07/1996

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

30 Country

4. FEI Number

65-0379490

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

9. Name and Address of Current Registered Agent

AMERICAN INFORMATION SERVICES, INC.
1 S.E. 3RD AVENUE
27TH FLOOR
MIAMI FL 33131

10. Name and Address of New Registered Agent

81 Name

300002160983--E

82 Street Address (P.O. Box Number is Not Permitted)

05-01-97-01001-019

1155.00 *165.00

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

Sign, print, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE
NAME **DAVIA, STEVEN**
STREET ADDRESS **100 N.W. THIRD AVENUE**
CITY-ST-ZIP **FT. LAUDERDALE FL 33301**

TITLE ☐ DELETE
NAME **JORDAN, DEAN J**
STREET ADDRESS **100 NE THIRD AVE.**
CITY-ST-ZIP **FT. LAUDERDALE FL 33301**

TITLE ☐ DELETE
NAME **MURRAY, BRYAN**
STREET ADDRESS **100 NE THIRD AVE.**
CITY-ST-ZIP **FT. LAUDERDALE FL 33301**

TITLE ☐ DELETE
NAME **HUIZENGA, H W**
STREET ADDRESS **100 NE THIRD AVE.**
CITY-ST-ZIP **FT. LAUDERDALE FL 33301**

TITLE ☐ DELETE
NAME **ROCHON, RICHARD C**
STREET ADDRESS **100 NE THIRD AVE. 10th Floor**
CITY-ST-ZIP **FT. LAUDERDALE FL 33301**

TITLE ☐ DELETE
NAME **TORREY, WILLIAM**
STREET ADDRESS **100 NE THIRD AVE. 10th Floor**
CITY-ST-ZIP **FT. LAUDERDALE FL 33301**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **VT** ☒ Change ☐ Addition
1.2 NAME **Steve M. Davia**
1.3 STREET ADDRESS **100 NE 3 AVE, 10 FL**
1.4 CITY-ST-ZIP **Ft. Lauderdale FL 33301**

2.1 TITLE **V** ☐ Change ☒ Addition
2.2 NAME **Dejan Boker**
2.3 STREET ADDRESS **100 NE 3 AVE, 10th FL**
2.4 CITY-ST-ZIP **Ft. Lauderdale FL 33301**

3.1 TITLE **V** ☐ Change ☒ Addition
3.2 NAME **Stephen B. Rangerfield**
3.3 STREET ADDRESS **100 NE 3 AVE, 10th FL**
3.4 CITY-ST-ZIP **Ft. Lauderdale FL 33301**

4.1 TITLE **CO** ☒ Change ☐ Addition
4.2 NAME **H. Wayne Huizenga**
4.3 STREET ADDRESS **100 NE 3rd Ave 10th FL**
4.4 CITY-ST-ZIP **Ft. Lauderdale FL 33301**

5.1 TITLE **D** ☐ Change ☒ Addition
5.2 NAME **Martha J. Huizenga**
5.3 STREET ADDRESS **100 NE 3rd Ave, 10th FL**
5.4 CITY-ST-ZIP **Ft. Lauderdale FL 33301**

6.1 TITLE **D** ☐ Change ☒ Addition
6.2 NAME **Cris V. Branden**
6.3 STREET ADDRESS **100 NE 3rd Ave, 10th FL**
6.4 CITY-ST-ZIP **Ft. Lauderdale FL 33301**

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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or as an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/96)