

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 206546

FILED
Mar 28, 2003
Secretary of State

Entity Name: KROLL REALTY CO

Current Principal Place of Business:

5447 N FEDERAL HWY
FORT LAUDERDALE, FL 33308

New Principal Place of Business:

Current Mailing Address:

5447 N FEDERAL HWY
FORT LAUDERDALE, FL 33308

New Mailing Address:

FEI Number: 59-0811975 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KROLL, CARL M.
5447 N. FEDERAL HWY.
FT LAUDERDALE, FL 33308 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

Election Campaign Financing Trust Fund Contribution ()

OFFICERS AND DIRECTORS:

Title: S () Delete
Name: KROLL, IRENE E,
Address: 3625 NE 24TH AVE
City-St-Zip: FT LAUDERDALE, FL 00000,

Title: V () Delete
Name: KROLL, RAYMOND R,
Address: 608 SE 4 ST.
City-St-Zip: DEERFIELD BEACH, FL

Title: PD () Delete
Name: KROLL, CARL M,
Address: 3625 NE 24TH AVE
City-St-Zip: FT LAUDERDALE, FL 00000,

Title: V () Delete
Name: HINTZ, BRADLEY,
Address: 7061 SW 16TH ST
City-St-Zip: PLANTATION, FL

Title: V () Delete
Name: HINTZ, HELEN,
Address: 7061 SW 16TH ST
City-St-Zip: PLANTATION, FL

Title: V () Delete
Name: KROLL, DEBRA
Address: 4500 BRIARCLIFF LANE
City-St-Zip: COCONUT CREEK, FL 33068

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CARL M. KROLL

PD

03/28/2003

Electronic Signature of Signing Officer or Director

_____ Date