2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR

3. Mailing Address

City & State

Suite, Apt. #, etc.

DOCUMENT # N01000007176

Suite, Apt. #, etc.

City & State

COLLABORATIVE FAMILY LAWYERS OF SOUTH FLORIDA, I



Feb 17, 2003 8:00 am Secretary of State 02-17-2003 90197 022 ****61.25

FILED

NC.

Principal Place of Business Mailing Address 1900 WEST COMMERCIAL BLVD., STE. 130 1900 WEST COMMERCIAL BLVD., STE. 130 FT. LAUDERDALE FL 33309 FT. LAUDERDALE FL 33309 2. Principal Place of Business

☐ CHECK HERE IF MAKING CHANGES						
Number 65-1154241	Applied For					

4. F Zip Not Applicable Zip Country 5. Certificate of Status Desired \$8.75 Additional 6. Name and Address of Current Registered Agent Fee Required 7. Name and Address of New Registered Agent SHAW, ROBIN C ESQ.

6503 N. MILITARY TRAIL #2000 BOCA RATON FL 33496-2636

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. I am familiar with, and accept

SIGNATURE

ROBIN CARACSHAN

10.	FILE NOW: FEE IS \$61.25	Trust Fund Co	paign Financing ontribution.	\$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State	
TITLE	OFFICERS AND DIRECTORS		11.	ADDITIONS (CHANG	ES TO OFFICE AND ADDRESS OF THE PROPERTY OF TH	
NAME	- -	☐ Delete	TITLE	7.55THONS/OFIANG	ES TO OFFICERS AND DIRECTORS IN 10	
I	BASS, IRIS M ESQ.		NAME	1	☐ Change ☐ Addition	
STREET ADDRESS	1900 WEST COMMERCIAL BLVD., STE. 1	30		1		
CITY-ST-ZIP	FT. LAUDERDALE FL 33309	30	STREET ADDRESS	1		
TITLE	TD TD		CITY-ST-ZIP	<u></u> _		
NAME	BERZNER, STEVEN ESQ.	☐ Delete	TITLE		[] ()	
STREET ADDRESS	1040 BAYVIEW DR., STE. 605		NAME		☐ Change ☐ Addition	
CITY-ST-ZIP	ET LAUDEDDALE EL ANDE		STREET ADDRESS		ĺ	
TITL F	FT. LAUDERDALE FL 33304		CITY-ST-ZIP		Ì	
TITLE	D	Delete	-TITLE -	7.50 - 1 - 5 -		
NAME	SHAW, ROBIN C		NAME	Director	Change Addition	
STREET ADDRESS	SOUT MILLEATH FRAIL, #2000		STREET ADDRESS	hobri carai	Suaw	
CITY-ST-ZIP	BOCA RATON FL 33496-2636			4800	Shaw Grange Addition STE YOU	
TITLE	VD		CITY-ST-ZIP	BOCA RATO.	U. FL 33432	
NAME	PETERSON, THERESA ESQ.	Delete	TITLE			
STREET ADDRESS	2425 HOLLYWOOD BLVD.		NAME		☐ Change ☐ Addition	
CITY-ST-ZIP	HOLLYWOOD ST. ASSAS		STREET ADDRESS			
	HOLLYWOOD FL 33020		CITY-ST-ZIP			
TITLE	SD	☐ Delete	TITLE			
NAME	BYLES, DEBORAH ESQ.		NAMF		☐ Change ☐ Addition	
STREET ADDRESS	350 EAST LAS OLAS BLVD., STE.1700		STREET ADDRESS			
CITY-ST-ZIP	FT. LAUDERDALE FL 33301					
TITLE	D	- 	CITY-ST-ZIP			
NAME	PARKER, BEVERLY ESQ.	☐ Delete	TITLE			
STREET ADDRESS	ONE FINANCIAL DI AZA OTE ACCE		NAME		☐ Change ☐ Addition	
CITY-ST-ZIP	ONE FINANCIAL PLAZA, STE. 2626	ľ	STREET ADDRESS			
	FT. LAUDERDALE FL 33394	I	CITY-ST-ZIP		1	
2. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 110 07(0)().						

mental 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 or an address, with all other like empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if of the corporation or the receiver