

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 16, 2003 8:00 am
Secretary of State

04-16-2003 90203 013 ***150.00

DOCUMENT # P01000118336

1. Entity Name
LAWMARKETING & MANAGEMENT, INC.



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
1016 LAKE BELL DRIVE
Suite, Apt. #, etc.

3. Mailing Address
SAME AS #2
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
WINTER PARK, FL

City & State

4. FEI Number
04-3588272

Applied For
Not Applicable

Zip
32789-1806

Country
ORANGE

Zip

Country

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

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

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

1016 LAKE BELL DRIVE
City
WINTER PARK, FL Zip Code
32789-1806

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 the obligations of registered agent.

SIGNATURE MICHAEL TIERNEY

4-13-03
DATE

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PRESIDENT
MICHAEL TIERNEY
1016 LAKE BELL DR.
WINTER PARK, FL 32789-1806

TITLE
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CITY-ST-ZIP

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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 607, Florida Statutes; and that my name appears in Block 10 or on an attachment with an address, with all other like empowered.

SIGNATURE: [Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-13-02 (407) 740-0003
Date Daytime Phone #

CR2E034B (12/02)