

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 710444

1. Entity Name

ROBERT O. LAW FOUNDATION, INC.

Principal Place of Business

POST OFFICE BOX 11025
FT. LAUDERDALE FL 33339

Mailing Address

POST OFFICE BOX 11025
FT. LAUDERDALE FL 33339

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-0914810

Applied For

Not Applicable

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

LEONARD, WILLIAM F.
4875 N. FEDERAL HWY., 10TH FLOOR
FT. LAUDERDALE FL 33308

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

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD
NAME LAW, ROBERT O., III
STREET ADDRESS 50 E ROAD #12-E
CITY-ST-ZIP DELRAY BCH FL 33483 ☐ Delete

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 50 E. Road #6-D
CITY-ST-ZIP Delray Beach, FL 33483

TITLE VPD
NAME LAW, MARY JANE
STREET ADDRESS P O BOX 1592
CITY-ST-ZIP BOCA RATON FL 33429 ☐ Delete

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 3224 S. Ocean Blvd., #110
CITY-ST-ZIP Highland Beach, FL 33487

TITLE STD
NAME LEONARD, WILLIAM F.
STREET ADDRESS 4875 N. FEDERAL HWY.
CITY-ST-ZIP FT. LAUDERDALE FL ☐ Delete

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 4875 N. Federal Hwy, 10th Floor
CITY-ST-ZIP Ft. Lauderdale, FL 33308

TITLE D
NAME HART, LESLIE LAW
STREET ADDRESS 705-2 E. BIDWELL ST. #198
CITY-ST-ZIP FOLSOM CA ☐ Delete

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

TITLE D
NAME LAW, ROBERT O IV
STREET ADDRESS 661 SE 5TH AVENUE
CITY-ST-ZIP POMPANO BCH FL 33060 ☐ Delete

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

TITLE DAS
NAME USBECK, CAROL J
STREET ADDRESS 8516 N.W. 57TH PLACE
CITY-ST-ZIP TAMARAC FL ☐ Delete

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP Tamarac, FL 33321

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Signature of Carol J. Usbeck

Date 1-18-01

Daytime Phone # 954-776-3600

CR2E037 (10/00)