

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 14, 2002 8:00 am
Secretary of State

01-14-2002 90046 013 ****61.25

DOCUMENT # 710444

1. Entity Name

ROBERT O. LAW FOUNDATION, INC.

Principal Place of Business

Mailing Address

**POST OFFICE BOX 11025
 FT. LAUDERDALE FL 33339**

**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 ☐ Delete
 NAME LAW, ROBERT O., III
 STREET ADDRESS 50 E ROAD # 6-D
 CITY-ST-ZIP DELRAY BCH FL 33483

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

TITLE VPD ☐ Delete
 NAME LAW, MARY JANE
 STREET ADDRESS 3224 S OCEAN BLVD # 110
 CITY-ST-ZIP HIGHLAND BEACH FL 33487

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

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

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

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

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

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

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

TITLE DAS ☐ Delete
 NAME USBECK, CAROL J.
 STREET ADDRESS 8516 N.W. 57TH PLACE
 CITY-ST-ZIP TAMARAC FL 33321

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

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 REQUIRED
 CAROL J. USBECK

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1-8-02 954-776-3600

CR2E037 (9/01)