
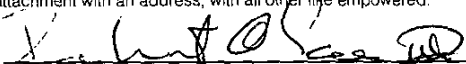


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 12, 2004 8:00 am
Secretary of State

01-12-2004 90009 005 ****61.25

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 1323 S. E. Third Avenue Suite, Apt. #, etc.		3. Mailing Address 1323 S. E. Third Avenue Suite, Apt. #, etc.	
City & State Ft. Lauderdale, FL 33316		City & State Ft. Lauderdale, FL 33316	
Zip 33316	Country USA	Zip 33316	Country USA
4. FEI Number 59-0914810		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent LEONARD, WILLIAM F. 4875 N. FEDERAL HWY., 10TH FLOOR FT. LAUDERDALE, FL 33308		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) William F. Leonard 1995 E. Oakland Park Blvd., # 105 City Ft. Lauderdale, FL Zip Code 33306	
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 _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____			
Filing Fee is \$61.25 Due by May 1, 2004		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD LAW, ROBERT O., III 50 E ROAD # 6-D DELRAY BCH, FL 33483 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD LAW, MARY JANE 300 S. SYKES CREEK PKWY #208 MERRITT ISLAND, FL 32952 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD LEONARD, WILLIAM F. 4875 N. FEDERAL HWY. FT. LAUDERDALE, FL <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 1995 E. Oakland Park Blvd., #105 Ft. Lauderdale, FL 33306
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HART, LESLIE LAW 705-2 E. BIDWELL ST. #198 FOLSOM, CA <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LAW, ROBERT O IV 661 SE 5TH AVENUE POMPANO BCH, FL 33060 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DAS USBECK, CAROL J 8516 N.W. 57TH PLACE TAMARAC, FL 33321 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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 title empowered.			
SIGNATURE: 		1/8/2004 954-764-1005	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	