## **2001 UNIFORM BUSINESS REPORT (UBR) FILED** Apr 17, 2001 08:00 AM N34876 DOCUMENT # 1. Entity Name **Secretary of State** THE FLORIDA BAR CHILDREN'S FUND, INC. Principal Place of Business Mailing Address % JOHN F. HARKNESS, JR. % JOHN F. HARKNESS, JR. 650 APALACHEE PARKWAY (FLA. BAR CENTER) 650 APALACHEE PARKWAY (FLA. BAR CENTER) TALLAHASSEE TALLAHASSEE 323992300 323992300 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-3006114 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent HARKNESS, JOHN F., JR. Street Address (P.O. Box Number is Not Acceptable) THE FLORIDA BAR CENTER 650 APALACHEE PARKWAY TALLAHASSEE FL323992300 US City 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. 04/17/2001 SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOW: Make Check Payable to **\$5.00** May Be FEE IS \$61.25 Trust Fund Contribution. Added to Fees Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE PD Delete TITLE VD Change ☐ Addition NAME NAME RUSSOMANNO HERMAN TOD ARONOVITZ STREET ADDRESS STREET ADDRESS 150 W FLAGLER ST 150 W.FLAGLER ST., SUITE 2700 CITY-ST-ZIP CITY-ST-ZIP MIAMI MIAMI 33130 FT. 33130 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME HARKNESS, JOHN F., JR. NAME STREET ADDRESS 650 APALACHEE PARKWAY STREET ADDRESS CITY-ST-ZIP TALLAHASSEE 323992300 CITY-ST-ZIP TITLE Delete TITLE PD X Change ☐ Addition NAME RUSSELL TERRENCE J NAME RUSSELL TERRENCE STREET ADDRESS STREET ADDRESS 200 E. BROWARD BOULEVARD 200 E. BROWARD BOULEVARD CITY-ST-ZIP FORT LAUDERDALE 333021900 CITY-ST-ZIP FORT LAUDERDALE FL. FT. 333021900 TITLE Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE □ Delete TITLE Change 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 like empowered.

STREET ADDRESS

CITY-ST-ZIP

NAME

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE: \_ JOHN F. HARKNESS, JR.

STD

04/17/2001

CR2E037 (11/00)