

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01000069957

1. Entity Name

THE LAW OFFICES OF JAMES R. HUBBARD, PA

Principal Place of Business

1645 PALM BEACH LAKES BLVD SUITE 380
WEST PALM BEACH FL 33401

Mailing Address

1645 PALM BEACH LAKES BLVD SUITE 380
WEST PALM BEACH FL 33401

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

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

RUFFINI, CHRISTINE G
505 SOUTH FLAGLER DRIVE SUITE 1330
WEST PALM BEACH FL 33401

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. 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

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back)

FILE NOW!!! FEE IS \$550.00
After September 13, 2002 Fee will be \$750.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution.

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
HUBBARD, JAMES R
1645 PALM BEACH LAKES BLVD SUITE 380
WEST PALM BEACH FL 33401

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Change Addition
8000008422888
10/17/02--01039--008 **150.00

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Delete

TITLE
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CITY-ST-ZIP
Change Addition

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CITY-ST-ZIP
Change Addition

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CITY-ST-ZIP
Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Change Addition

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

[Signature]

9-10-02 561-625-4011

FILED

02 OCT 11 PM 3:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

CR2E034 (4/02)

LAW OFFICES
JAMES R. HUBBARD, P.A.

MELLON UNITED NATIONAL BANK TOWER
1645 PALM BEACH LAKES BOULEVARD, SUITE 380
WEST PALM BEACH, FLORIDA 33401

TELEPHONE (561) 615-8100

FAX (561) 615-0810
E-MAIL: JHUBBARD@HUBBARD-LAW.COM


Division of Corporations
Uniform Business Filings
P.O. Box 1500
Tallahassee, Florida 32302-1500

Re: James R. Hubbard, P.A.

Gentlemen:

Enclosed is our 2002 Report. I apologize that it is tardy, but unfortunately it was misdelivered in the mail, to my old address, and just discovered. My old suite is 250, the new one is 380. For this reason, I respectfully request a one time waiver of the late penalty. Thank you for your consideration.

Sincerely,


James R. Hubbard

JRH/