2003 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 06, 2003
Secretary of State

DOCUMENT# P99000045054

Entity Name: LAWBUCK APARTMENTS, INC.

Current Principal Place of Business:

4450 SE FEDERAL HWY
STUART, FL 34997

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 504
MONTEGO BAY NO. 2, FL 34997

New Mailing Address:

4450 SE FEDERAL HIGHWAY
STUART, FL 34997 US

FEI Number: 11-2920250 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CHRISTINE M MORENO ATTORNEY PA
4450 SE FEDERAL HWY
STUART, FL 34997 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: LAWSON, RICHARD A
Address: P.O. BOX 504
City-St-Zip: MONTEGO BAY 2, JAMAICA W.IND,

Title: SD ( ) Delete
Name: LAWSON, RICHARD F
Address: PO BOX 504
City-St-Zip: MONTEGO BAY NO 2 ,JAMICA, WI

Title: D ( ) Delete
Name: LAWSON, DAPHNE A
Address: PO BOX 504
City-St-Zip: MONTEGO BAY NO 2 JAMAICA, WI

Title: D ( ) Delete
Name: LAWSON, NOVA
Address: PO BOX 504
City-St-Zip: MONTEGO BAY NO 2 JAMAICA, WI

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RICHARD A. LAWSON PD 03/06/2003

Electronic Signature of Signing Officer or Director — Date