

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.  
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED

Sep 17 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 507813 (4)  
1. Corporation Name  
SCHAAF DEVELOPMENT GROUP, INC.



Principal Place of Business  
725 NORTH A1A  
SUITE D-101  
JUPITER FL 33477  
US

Mailing Address  
P.O. BOX 2280  
JUPITER FL 33418  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/21/1976

4. FEI Number

59-1680631

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30.

☐ Yes ☐ No

9. Name and Address of Current Registered Agent

MENOWN, MICHELLE T.  
6094 UNGERER ST.  
PALM BEACH GARDENS FL 33418

10. Name and Address of New Registered Agent

81 Name Michelle T. Menown

82 Street Address (P.O. Box Number is Not Acceptable)

257 Cardinal Lane

83

84 City Jupiter

FL

85

Zip Code 33458

11. Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes.

SIGNATURE Michelle T. Menown, Michelle T. Menown, Vice Pres of Admin. 9/13/98

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP  
SCHAAF, GREGG  
P.O. BOX 2280 N/A  
JUPITER FL

TITLE VSD ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP  
TASSELL, DAVID  
P.O. BOX 2280 N/A  
JUPITER FL

TITLE AST ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP  
SCHAAF, GREGG  
P.O. BOX 2280 N/A  
JUPITER FL

TITLE V ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP  
MENOWN, MICHELLE T.  
P.O. BOX 2280 N/A  
JUPITER FL

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Michelle T. Menown

9/13/98 561747-6992

CR2E034 (5/98)