2001 UNIFORM:BUSINESS REPORT (UBR)

changed, or on an attachment with an address

SIGNATURE:

tike empo

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

avid C. Tassell

Mar 28, 2001 8:00 am **DOCUMENT # 507813** Secretary of State 1. Entity Name SCHAAF DEVELOPMENT GROUP, INC. 03-28-2001 90210 017 ***150.00 Principal Place of Business Mailing Address P.O. BOX 2280 725 NORTH A1A JUPITER FL 33418 SUITE D-101 JUPITER FL 33477 HS 2. Principal Place of Business 3. Mailing Address Suite, Apt. #. etc. Suite, Apt. #, etc.-DO NOT WRITE IN THIS: SPACE Applied For City & State City & State 4. FEI Number 59-1680631 Not Applicable Country \$8.75 Additional Zip Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent MENOWN, MICHELLE T. 257 CARDINAL LANE JUPITER FL 33458 d entity submits this statement for the purpose of changing its registered office or legistered agent, or both, in the State of Florida 8. The about SIGNATUR nd title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10.-Election Campaign Financing \$5:00 May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. Addition Delete TITLE TITLE NAME NAME SCHAAF, GREGG STREET ADDRESS STREET ADDRESS P.O. BOX 2280 N.A CITY-ST-ZIP CITY-ST-ZIP JUPITER FL ☐ Change ☐ Addition ☐ Delete TITLE VSD TITLE NAME NAME TASSELL, DAVID STREET ADDRESS STREET ADDRESS P.O. BOX 2280 N/A CITY-ST-ZIP City-St-ZIP JUPITER FL Change Addition Delete TITLE TITLE AST NAME NAME SCHAAF, GREGG STREET ADDRESS STREET ADDRESS P.O. BOX 2280 N/A CITY-ST-ZIP CITY-ST-ZIP JUPITER FL ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME MENOWN, MICHELLE T. STREET ADDRESS STREET ADDRESS P.O: BOX 2280 N/A ~ CITY-ST-ZIP CITY-ST-7IP JUPITER FL ☐ Delete ☐ Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CiTY-ST-ZIP ☐ Delete Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP 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 received or trustee employee to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if

FILED