2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

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DOCUMENT # A00000000493

1. Entity Name
SCHLITT ENTERPRISES, LTD.

FILED
03 APR 18 PM 1:38
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business	Mailing Address
2027 INDIAN RIVER BLVD. VERO BEACH FL 32960	2027 INDIAN RIVER BLVD. VERO BEACH FL 32960

2. Principal Place of Business	3. Mailing Address
3240 CARDINAL DRIVE	3240 CARDINAL DRIVE
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: VERO BEACH, FL	City & State: VERO BEACH, FL
Zip: 32963 Country: USA	Zip: 32963 Country: USA

DUE BY MAY 1, 2003

4. FEI Number 65-0991281 ☐ 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
GARRIS, CHARLES E 817 BEACHLAND BOULEVARD VERO BEACH FL 32963	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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable.

9. Capital Contributions as Shown on record.	10. Amount of Capital Contributions in FLORIDA to date.	11. MAKE CHECK PAYABLE TO FL. DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION
$2,000,000.00	$ 2,000,000	

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION		13. ADDRESS CHANGES ONLY	
DOCUMENT #	G67265	STREET ADDRESS	3240 CARDINAL DRIVE
NAME	SCHLITT CONSULTING SERVICES, INC.	CITY-ST-ZIP	VERO BEACH, FL 32963
STREET ADDRESS	2027 INDIAN RIVER BLVD.		
CITY-ST-ZIP	VERO BEACH FL 32960		
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
STREET ADDRESS			
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NAME		CITY-ST-ZIP	
STREET ADDRESS			
CITY-ST-ZIP			

CR2E003 (10/02)

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 report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE: Marguerite M Schlitt SIGNATURE REQUIRED 4/10/03 772-231-4480
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER — Date — Daytime Phone #