# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A98000002891

1. Entity Name

SCHAFER INVESTMENTS, LTD.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 FEB 14 AM 10:24

| Principal Place of Business | Mailing Address |
|---|---|
| 144 SEVERINO DRIVE<br>ISLAMORADA FL 33035 | 144 SEVERINO DRIVE<br>ISLAMORADA FL 33036-3310 |

DO NOT WRITE IN THIS SPACE

| 2. Principal Place of Business | 3. Mailing Address |
|---|---|
| 168 Indian Mound Trail<br>Suite, Apt. #, etc. | SAME<br>Suite, Apt. #, etc. |
| City & State: Tavernier FL | City & State: |
| Zip: 33070 Country: Monroe | Zip: Country: |

4. FEI Number: 65-0884979 ☐ 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 |
|---|---|
| ATRIUM REGISTERED AGENTS, INC.<br>1500 SAN REMO AVE., SUITE 125<br>CORAL GABLES FL 33146 | Name: Warren Schaffer<br>Street Address (P.O. Box Number is Not Acceptable): 168 Indian Mound Trail<br>City: Tavernier FL Zip Code: 33070 |

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.

SIGNATURE _____ DATE 1/20/00
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

| 9. Capital Contributions as Shown on record. | 10. Amount of Capital Contributions in FLORIDA to date. | 11. MAKE CHECK PAYABLE TO DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION |
|---|---|---|
| $1,000,000.00 | | |

**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 # | P98000104070 | STREET ADDRESS | 168 Indian Mound Trail |
| NAME | SCHAFER CONSULTANTS, INC. | CITY-ST-ZIP | Tavernier FL 33070 |
| STREET ADDRESS | 144 SEVERINO DRIVE | | P00003140457--2 |
| CITY-ST-ZIP | ISLAMORADA FL 33035 | | -02/25/00--01099--015 |
| | | | ****525.25 ****525.25 |
| DOCUMENT # | | STREET ADDRESS | mf 2/23/00 |
| NAME | | CITY-ST-ZIP | |
| STREET ADDRESS | | | |
| CITY-ST-ZIP | | | |
| DOCUMENT # | | STREET ADDRESS | |
| NAME | | CITY-ST-ZIP | |
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| CITY-ST-ZIP | | | |
| DOCUMENT # | | STREET ADDRESS | |
| NAME | | CITY-ST-ZIP | |
| STREET ADDRESS | | | |
| 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 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:** SIGNATURE REQUIRED 1/20/00 305-852-2629
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER — Date — Daytime Phone #

#233545058

CR2E003 (9/99)