

DOCUMENT # F01473

1. Entity Name

SCHMECHEL-BEHRENS, INC.

FILED
Jan 16, 2001 8:00 am
Secretary of State

01-16-2001 90068 021 \*\*\*150.00

Principal Place of Business: 6820 W 12TH ST JACKSONVILLE FL 32254
Mailing Address: PO BOX 6161 JACKSONVILLE FL 32236 US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business: 5910 LAKE CIRS
3. Mailing Address

City & State: JAX, FL
Zip: 32254 Country: USA

4. FEI Number: 59-2027170
Applied For: Not Applicable

5. Certificate of Status Desired: \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent: BEHRENS, JAMES R 4746 GLENWOOD AVE JACKSONVILLE FL 32205

7. Name and Address of New Registered Agent

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: \_\_\_\_\_

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

Table with 2 columns: OFFICERS AND DIRECTORS. Includes entries for ST SCHMECHEL, BEN J. and P BEHRENS, JAMES R.

Table with 2 columns: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11. Includes empty rows for new entries.

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...

SIGNATURE: [Signature] JAMES R BEHRENS 1-9-01 904 6931110
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)