

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # G75894

1. Entity Name

SCHATT INVESTMENT CORPORATION

FILED
Apr 19, 2001 8:00 am
Secretary of State

04-19-2001 90079 005 ***150.00

Principal Place of Business

1251 SW 43RD PLACE
OCALA FL 34474
US

Mailing Address

1251 SW 43RD PLACE
OCALA FL 34474
US

2. Principal Place of Business

950 SW 43rd Place

3. Mailing Address

← Same

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Ocala FL

City & State

Ocala FL

Zip

34474

Country

USA

Zip

Country

4. FEI Number

59-2369478

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SCHATT, JAMES
1251 SW 43RD PLACE
OCALA FL 34474

7. Name and Address of New Registered Agent

Name

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

950 SW 43rd Place

City

Ocala

FL

Zip Code

34474

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 Y

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

(NOTE: Registered Agent signature required when reinstating)

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

11. OFFICERS AND DIRECTORS

TITLE P
NAME SCHATT, ESTHER PENNY
STREET ADDRESS YACHT CLUB RD POB 37
CITY-ST-ZIP EAST LAKE WEIR, FL 00000 ☐ Delete

TITLE V
NAME SHIM, MARTHA ABBOTT
STREET ADDRESS 2473 OAKLEIGH COURT
CITY-ST-ZIP ATLANTA, GA 00000 ☐ Delete

TITLE TS
NAME SCHATT, JAMES H
STREET ADDRESS 1251 SW 43RD PLACE
CITY-ST-ZIP Ocala FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☒ Change ☐ Addition
950 SW 43rd Place
Ocala, FL 34474

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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 receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: X James H. Schatt

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

James Schatt 4-11-01

Date

Daytime Phone #

352-237

1096

CR2E034 (10/00)