

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # M98000001174

1. Entity Name  
BAITA REALTY INVESTMENT MANAGEMENT, LLC

Principal Place of Business  
1777 NORTHEAST EXPRESSWAY, SUITE 145  
ATLANTA GA 30329

Mailing Address  
1777 NORTHEAST EXPRESSWAY, SUITE 145  
ATLANTA GA 30329-2440

2. Principal Place of Business  
3340 Peachtree Road

3. Mailing Address  
3340 Peachtree Road

Suite, Apt. #, etc.  
St 1500

Suite, Apt. #, etc.  
St 1500

City & State  
Atlanta GA

City & State  
Atlanta GA

Zip  
30326

Country

Zip  
30326

Country



DO NOT WRITE IN THIS SPACE

MWM

4. FEI Number  
58-2397423

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

## 6. Name and Address of Current Registered Agent

SULZBACHER, WILLIAM M  
7400 BAYMEADOWS WAY, SUITE 107  
JACKSONVILLE FL 32256

## 7. Name and Address of New Registered Agent

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$50.00  
Make Check Payable to Department of State

## 9. MANAGING MEMBERS/MEMBERS

TITLE MGR  
NAME SCHNEIDER, RETO J  
STREET ADDRESS 1777 NORTHEAST EXPRESSWAY, SUITE 145  
CITY-ST-ZIP ATLANTA GA 30329 ☐ Delete

TITLE MGR  
NAME LATONE, SAMUEL P II  
STREET ADDRESS 1777 NORTHEAST EXPRESSWAY, SUITE 145  
CITY-ST-ZIP ATLANTA GA 30329 ☐ Delete

TITLE MGR  
NAME KOLEOS, DAVID J  
STREET ADDRESS 1777 NORTHEAST EXPRESSWAY, SUITE 145  
CITY-ST-ZIP ATLANTA GA 30329 ☒ Delete

TITLE MGR  
NAME PRINGLE, T. NEAL  
STREET ADDRESS 1777 NORTHEAST EXPRESSWAY, SUITE 145  
CITY-ST-ZIP ATLANTA GA 30329 ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

## 10. ADDITIONS/CHANGES

TITLE  
NAME  
STREET ADDRESS 3340 Peachtree Road, St 1500  
CITY-ST-ZIP Atlanta GA 30326 ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS 3340 Peachtree Road, St 1500  
CITY-ST-ZIP Atlanta GA 30326 ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS 600003243006-2  
CITY-ST-ZIP -05/08/00--01117--001  
\*\*\*\*\*50.00 \*\*\*\*\*50.00 ☒ Change ☐ Addition

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

11. 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 managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

SIGNATURE

4-18-00

678-686.6778

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

Date

Daytime Phone #

0016908 AF

16/01/00 1:10