

# 2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jan 08, 2003 8:00 am**  
**Secretary of State**

01-08-2003 90010 024 \*\*\*\*61.25



☐ CHECK HERE IF MAKING CHANGES

<b>DOCUMENT # N09346</b>
<b>1. Entity Name</b> <b>THE SCHWARTZ FAMILY QUARTET, INC.</b>

<b>Principal Place of Business</b> C/O FANNIE SCHWARTZ 3366 8TH STREET SARASOTA FL 34237	<b>Mailing Address</b> C/O FANNIE SCHWARTZ 3366 8TH STREET SARASOTA FL 34237
---	---

<b>2. Principal Place of Business</b>	<b>3. Mailing Address</b>
---------------------------------------	---------------------------

Suite, Apt. #, etc.	Suite, Apt. #, etc.
---------------------	---------------------

City & State	City & State
--------------	--------------

Zip	Country	Zip	Country
-----	---------	-----	---------

<b>4. FEI Number</b> 59-2737516	Applied For
	Not Applicable

<b>5. Certificate of Status Desired</b> <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
--	---------------------------------------

<b>6. Name and Address of Current Registered Agent</b>
--

SCHWARTZ, FANNIE 3366 8TH STREET SARASOTA FL 33577
--

<b>7. Name and Address of New Registered Agent</b>
--

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** \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) **DATE** \_\_\_\_\_

<b>FILE NOW: FEE IS \$61.25</b>	<b>9. Election Campaign Financing</b> <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	<b>Make Check Payable to Florida Department of State</b>
---------------------------------	---	--

<b>10. OFFICERS AND DIRECTORS</b>
-----------------------------------

<b>TITLE</b>	<b>PD</b>	<input type="checkbox"/> Delete
<b>NAME</b>	SCHWARTZ, PETER N.	
<b>STREET ADDRESS</b>	4720 CRONIN DR.	
<b>CITY-ST-ZIP</b>	SARASOTA FL	
<b>TITLE</b>	<b>VD</b>	<input type="checkbox"/> Delete
<b>NAME</b>	SCHWARTZ, MARTHA J.	
<b>STREET ADDRESS</b>	4720 CRONIN DR.	
<b>CITY-ST-ZIP</b>	SARASOTA FL	
<b>TITLE</b>	<b>VD</b>	<input type="checkbox"/> Delete
<b>NAME</b>	SCHWARTZ, MARGARET	
<b>STREET ADDRESS</b>	3366 8TH STREET	
<b>CITY-ST-ZIP</b>	SARASOTA FL	
<b>TITLE</b>	<b>STD</b>	<input type="checkbox"/> Delete
<b>NAME</b>	SCHWARTZ, FANNIE	
<b>STREET ADDRESS</b>	3366 8TH STREET	
<b>CITY-ST-ZIP</b>	SARASOTA FL	
<b>TITLE</b>		<input type="checkbox"/> Delete
<b>NAME</b>		
<b>STREET ADDRESS</b>		
<b>CITY-ST-ZIP</b>		
<b>TITLE</b>		<input type="checkbox"/> Delete
<b>NAME</b>		
<b>STREET ADDRESS</b>		
<b>CITY-ST-ZIP</b>		

<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>
--

<b>TITLE</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>NAME</b>	
<b>STREET ADDRESS</b>	
<b>CITY-ST-ZIP</b>	
<b>TITLE</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>NAME</b>	
<b>STREET ADDRESS</b>	
<b>CITY-ST-ZIP</b>	
<b>TITLE</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>NAME</b>	
<b>STREET ADDRESS</b>	
<b>CITY-ST-ZIP</b>	
<b>TITLE</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>NAME</b>	
<b>STREET ADDRESS</b>	
<b>CITY-ST-ZIP</b>	
<b>TITLE</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>NAME</b>	
<b>STREET ADDRESS</b>	
<b>CITY-ST-ZIP</b>	

**12. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.**

**SIGNATURE:** FANNIE SCHWARTZ **01-06-03** **941-957-3659**

CR2E037 (10/02)