

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 23, 2002 8:00 am
Secretary of State

05-23-2002 90105 019 ***150.00

DOCUMENT # P01000074821

1. Entity Name

JABEZ INVESTMENT GROUP, INC.

Principal Place of Business

**901 EAST YONGE STREET
 PENSACOLA FL 32503**

Mailing Address

**901 EAST YONGE STREET
 PENSACOLA FL 32503**

2. Principal Place of Business

1400 E. GONZALEZ ST

Suite, Apt. #, etc.

3. Mailing Address

1400 E. GONZALEZ ST

Suite, Apt. #, etc.

City & State

PENSACOLA, FL

City & State

PENSACOLA, FL

4. FEI Number

☒ Applied For

☐ Not Applicable

Zip

32501

Country

USA

Zip

32501

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**HALEY, LAURA S
 901 EAST YONGE ST
 PENSACOLA FL 32503**

7. Name and Address of New Registered Agent

Name **MICHAEL SCHROEDER**

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

1400 E. GONZALEZ ST

City

PENSACOLA

FL

Zip Code

32501

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

Michael Schroeder

4-30-02

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, 2002 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** ☒ Delete
 NAME **HALEY, LAURA S**
 STREET ADDRESS **901 EAST YONGE ST**
 CITY-ST-ZIP **PENSACOLA FL 32503**

TITLE **V** ☒ Delete
 NAME **SCOTT, ATHALIA B**
 STREET ADDRESS **7459 WYMART RD**
 CITY-ST-ZIP **PENSACOLA FL 32526**

TITLE **ST** ☒ Delete
 NAME **SCOTT, JOHN P**
 STREET ADDRESS **901 EAST YONGE STREET**
 CITY-ST-ZIP **PENSACOLA FL 32503**

TITLE **P, VP, SEC - TREAS** ☐ Delete
 NAME **MICHAEL SCHROEDER**
 STREET ADDRESS **1400 E. GONZALEZ ST.**
 CITY-ST-ZIP **PENSACOLA, FL 32501**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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

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:

Michael Schroeder

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/30/02

CR2E034 (9/01)