2004 FOR PROFIT CORPORATION ANNUAL REPORT

Mar 18, 2004 8:00 am Secretary of State DOCUMENT # P03000053547 03-18-2004 90030 007 ***150.00 J. THOMAS SCHLITT REAL ESTATE, INC. Principal Place of Business Mailing Address 1850 COBIA DRIVE 1850 COBIA DRIVE VERO BEACH, FL 32960 VERO BEACH, FL 32960 2. Principal Place of Business 3. Mailing Address 2053 U.S.HIGHWAY 2053 U.S. HIGHWAY Suite, Apt. #, etc. Suite, Apt. #, etc. 03082004 CR2E034 (10/03) Chg-P City & State City & State 4. FEI Number Applied For BEACH) Ero BFACH 65-1194441 Glo Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired 32960 USIK Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent SCHL17T, J. THOMAS SCHLITT, J. THOMAS Street Address (P.O. Box Number is Not Acceptable) 1850 COBIA DRIVE VERO BEACH, FL 32960 EM BEACH 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. nd title if applicable (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 DIRECTOR/PRESIDENT Change TITLE ☐ Delete TITI F ☐ Addition SCHUTT, J. THOMAS NAME SCHLITT, J. THOMAS NAME 2053 U.S. WIGHWAY ONE 1850 COBIA DRIVE STREET ADDRESS STREET ADDRESS E20 85ACH, FL 32960 CITY-ST-ZIP VERO BEACH, FL 32960 CITY-ST-ZIP J.P. : SOUTH COUNTY SALES & A TITLE ☐ Delete TITLE Addition LAW, BILL C. NAME 2053 U.S. HIGHWAY DNS STREET ADDRESS STREET ADDRESS JERO BEACH, FL 32960 CITY-ST-ZIP CITY-ST-ZIP V.P. : CITY OF VERO Beach Change SALES TITLE ☐ Delete TITLE Addition JOSEPH P. Schlitt NAME NAME 2053 U.S. Highway One. Vero Beach, FL 32960 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITI F TITLE ☐ Delete ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Addition TITLE ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP 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 607, 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:

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