

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P14130

Entity Name: SCHMITT SOHNE, INC.

FILED  
Jan 05, 2006  
Secretary of State

## Current Principal Place of Business:

1111 BENFIELD BLVD.  
SUITE 112  
MILLERSVILLE, MD 21108

## New Principal Place of Business:

## Current Mailing Address:

1111 BENFIELD BLVD.  
SUITE 112  
MILLERSVILLE, MD 21108

## New Mailing Address:

FEI Number: 58-1350221

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DICKHAUS, PHILIP L.  
4050 13TH WAY NE  
ST. PETERSBURG, FL 33703 US

## Name and Address of New Registered Agent:

DICKHAUS, PHILIP L.  
4050 13TH WAY NE  
ST. PETERSBURG, FL 33703 US

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: PHILIP DICKHAUS

01/05/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: KLAU, CHRISTOPHER R  
Address: 400 COLONY SQUARE  
City-St-Zip: ATLANTA, GA 30361

Title: D ( ) Delete  
Name: SCHMITT, THOMAS,  
Address: 400 COLONY SQUARE #526  
City-St-Zip: ATLANTA, GA

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: KLAU, CHRISTOPHER R  
Address: 1111 BENFIELD BLVD., SUITE 112  
City-St-Zip: MILLERSVILLE, MD 21108

Title: D (X) Change ( ) Addition  
Name: SCHMITT, THOMAS  
Address: WEINSTRASSE 8  
City-St-Zip: LONGUICH/MOSEL, - 54340 DE

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CHRISTOPHER R KLAU

PD

01/05/2006

Electronic Signature of Signing Officer or Director

Date