

DOCUMENT # P98000064637

1. Entity Name

HATTERAS CAPITAL GROUP, INC.

APPROVED

APR 4-2000 90013 026 ***150.00

FILED

00 JUL 13 AM 8:40

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

Principal Place of Business

603 MONROE AVENUE
CAPE CANAVERAL FL 32920

Mailing Address

603 MONROE AVENUE
CAPE CANAVERAL FL 32920-2241

2. Principal Place of Business

Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FBI Number

59-3625336

Applied For

Not Applicable

5. Certificate of Status Desired

☐\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

~~SALVIN, ALLAN
GREENBERG TRAUER
777 SOUTH FLAGLER DR. SUITE 300 EAST TOWER
WEST PALM BEACH FL 33401~~

7. Name and Address of New Registered Agent

Name RIC SCHUMAN
Street Address (P.O. Box Number is Not Acceptable)603 Monroe Avenue
CAPE CANAVERAL FL 32920

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 RIC SCHUMAN
Signature, typewritten name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

7/JAN 20009. 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, 2000 Fee will be \$550.00
Make Check Payable to Department of State10. Election Campaign Financing
Trust Fund Contribution. ☐\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ Delete
	SCHUMAN, RICHARD	603 MONROE	CAPE CANAVERAL FL 32920	☐
				☐
				☐
				☐
				☐
				☐

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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:

RIC SCHUMAN
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR7 JAN 2000
Date

Daytime Phone #

407 780 8885