

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 22, 2007 8:00 am**  
**Secretary of State**

02-22-2007 90020 035 \*\*\*150.00

**DOCUMENT # 226407**

1. Entity Name

NEUKOM PROPERTIES, INC.



Principal Place of Business  
FAIRVIEW HEIGHTS RD  
ZEPHYRHILLS FL 33539  
US

Mailing Address  
PO BOX 1647  
ZEPHYRHILLS FL 33539  
US



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E034 (10/06)

4. FEI Number 59-6058187

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

NEUKOM, ANN BROOKE  
38444 5TH AVENUE (MAILING ADDRESS)  
ZEPHYRHILLS FL 33540

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reissuing.)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2007 Fee Will Be \$550.00**  
**Make Check Payable to Florida Department of State**

9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD  
NAME NEUKOM JR, GEORGE A  
STREET ADDRESS 38444 5TH AVENUE  
CITY- ST- ZIP ZEPHYRHILLS FL 33542 ☐ Delete

TITLE STD  
NAME NEUKOM, ANN BROOKE  
STREET ADDRESS 38444 5TH AVENUE  
CITY- ST- ZIP ZEPHYRHILLS FL 33542 ☐ Delete

TITLE STD  
NAME OAKLEY, TAMARA NEUKOM  
STREET ADDRESS 8423 FORT KING ROAD  
CITY- ST- ZIP ZEPHYRHILLS FL 33541 ☐ Delete

TITLE VD  
NAME NEUKOM, GEORGE A., III  
STREET ADDRESS 8341 FORT KING ROAD  
CITY- ST- ZIP ZEPHYRHILLS FL 33541 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS 8211 Fort King Road  
CITY- ST- ZIP ZEPHYRHILLS FL 33541 ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS 8211 Fort King Road  
CITY- ST- ZIP ZEPHYRHILLS FL 33541 ☒ Change ☐ Addition

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

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

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

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

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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:

*Ann Brooke Neukom*

2-12-07 (813) 782 2834

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #