


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 15, 2004 08:00 AM
Secretary of State

DOCUMENT # 286263 1. Entity Name GLOWORTH, INC.	
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Principal Place of Business 3013 VILLA ROSA PARK TAMPA, FL 33611 US	Mailing Address 400 GLOUCESTER STREET ENGLEWOOD, NJ 07631 US
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DO NOT WRITE IN THIS SPACE



01092004 No Chg-P CR2E034 (10/03)

4. FEI Number 59-1088409	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

PUFFER, JOHN
3013 VILLA ROSA PARK
TAMPA, FL 33611

**DO NOT WRITE
IN THIS SPACE**

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: _____ (NOTE: Registered Agent signature required when reinstating.) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD NEUWIRTH, ROBERT S 400 GLOUCESTER ST ENGLEWOOD, NJ.,
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S NEUWIRTH, LAURA 226 W 58TH ST. NEW YORK, NY.,
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T NEUWIRTH, JESSICA 226 W 58TH ST NEW YORK, NY
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01/15/04-80028-005 150.00

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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: *Robert S. Neuwirth* **Robert S. Neuwirth** 1/10/04 2018719507

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #