

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

Mar 03, 2004 08:00 AM
Secretary of State

DOCUMENT # K67097

1. Entity Name
TFS-19, INC.



Principal Place of Business

11300 4TH ST. N.
SUITE 200
ST. PETERSBURG, FL 33716 US

Mailing Address

11300 4TH ST. N.
SUITE 200
ST. PETERSBURG, FL 33716 US



01072004 No Chg-P CR2E034 (10/03)

4. FEI Number
59-2933253

Applied For
Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

SEMBLER, M. STEVEN
11300 4TH ST. N.
SUITE 200
ST. PETERSBURG, FL 33716

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

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

(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. ☐

\$5.00 May Be
Added to Fees

U00000074883
03/03/04-80038-011 150.00

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
PSTD
SEMBLER, M. STEVEN
11300 4TH ST. N., SUITE 200
ST. PETERSBURG, FL

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
V
JOHNSON, DARIAN W.
11300 4TH ST. N., SUITE 200
ST. PETERSBURG, FL

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
V
FELICE, DAVID M
11300 4TH STREET NORTH, SUITE 200
SAINT PETERSBURG, FL 33716

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

DO NOT WRITE
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)(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 1 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

M. Steven Sembler, President

2/06/04 7275775522

Date

Daytime Phone