

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jul 14, 2003 8:00 am**  
**Secretary of State**

07-14-2003 90332 005 \*\*\*150.00

0093255 AV

DOCUMENT # **L70830**

1. Entity Name  
**BARONIAL BUILDERS, INC.**



Principal Place of Business  
**16127 VANDERBILT DR  
ODESSA FL 33556**

Mailing Address  
**16127 VANDERBILT DR  
ODESSA FL 33556**



2. Principal Place of Business

**4631 Harbor Pointe Dr**  
Suite, Apt. #, etc.

3. Mailing Address

**4631 Harbor Pointe Dr**  
Suite, Apt. #, etc.

☒ CHECK HERE IF MAKING CHANGES

City, State  
**Port Richey, FL**

City, State  
**Port Richey, FL**

4. FEI Number **59-3014072**

Applied For  
Not Applicable

Zip  
**34668**

Country  
**USA**

Zip  
**34668**

Country  
**U.S.**

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

6. Name and Address of Current Registered Agent

**KURDZIEL, JAMES PAUL  
16127 VANDERBILT DR  
ODESSA FL 33556**

7. Name and Address of New Registered Agent

Name **Kurziel, James Paul**  
Street Address (P.O. Box Number is Not Acceptable)  
**4631 Harbor Pointe Dr**

City **Port Richey** **FL** Zip Code **34668**

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

**James P. Kurziel**

**7/8/03**

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$550.00**  
**After September 10, 2003 Fee will be \$750.00**  
**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 NAME STREET ADDRESS CITY-ST-ZIP	<b>DP KURDZIEL, JAMES PAUL 16127 VANDERBILT DR ODESSA FL 33556</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

**SIGNATURE REQUIRED**  
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**James P. Kurziel 7/8/03 (813) 263-7423**

Date Daytime Phone #

CR2E034 (4/03)

*Attachment*


10110092  
# L70830

Baronial Builders, Inc.  
4631 Harbor Pointe Dr.  
Port Richey, FL. 34668  
(813) 986-0513

*Uniform Business Report*

*Dear Sir/Madam:*

*Baronial Builders, Inc. received the second notice to file the Uniform Business Report on July 7, 2003. This is the first notice that Baronial Builders has received since filing in 2002. I am completing the required form and sending a check for \$150 immediately. Please waive the late fee. Thank You.*

  
7/14/03  
James P. Kurdziel, president  
Baronial Builders, Inc.