

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N96000004550

1. Entity Name

KONIGSWORT INCORPORATED

Principal Place of Business

Mailing Address

7245 34TH AVENUE NORTH
SAINT PETERSBURG FL 33710

7245 34TH AVENUE NORTH
SAINT PETERSBURG FL 33710
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3399582

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

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

SOROTA, JOSEPH J JR.
28100 U.S. HIGHWAY 19 NORTH
SUITE 404
CLEARWATER FL 34621

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD
NAME NEUMEIER, RICHARD D
STREET ADDRESS 2528 65TH AVENUE, NORTH
CITY-ST-ZIP ST. PETERSBURG FL

TITLE PD
NAME NEUMEIER, RICHARD D
STREET ADDRESS 8723 15TH STREET NORTH
CITY-ST-ZIP ST. PETERSBURG, FL. 33702

TITLE TD
NAME NEUMEIER, DEBRA A
STREET ADDRESS 2528 65TH AVENUE, NORTH
CITY-ST-ZIP ST. PETERSBURG FL

TITLE TD
NAME NEUMEIER, DEBRA A
STREET ADDRESS 8723 15TH STREET NORTH
CITY-ST-ZIP ST. PETERSBURG, FL. 33702

TITLE VD
NAME COSTON, STEPHEN A SR
STREET ADDRESS 7245 34TH AVENUE, NORTH
CITY-ST-ZIP ST. PETERSBURG FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE SD
NAME COSTON, LEIGH A
STREET ADDRESS 7245 34TH AVENUE, NORTH
CITY-ST-ZIP ST. PETERSBURG FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D
NAME THOMAS, JON K
STREET ADDRESS 11677 8TH LANE N APT #4
CITY-ST-ZIP ST PETERSBURG FL 33716

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D
NAME WILMETH, LENARD
STREET ADDRESS 11250 106TH ST N
CITY-ST-ZIP LARGO FL 34643

TITLE D
NAME WILMETH, LENARD
STREET ADDRESS 11190 73 RD AVENUE NORTH
CITY-ST-ZIP SEMINOLE, FL. 33772

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 617, 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. RICHARD D. NEUMEIER

SIGNATURE: RICHARD D. NEUMEIER

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

05/09/2002 727-217-9521

Date Daytime Phone #

FILED
May 28, 2002 8:00 am
Secretary of State

05-28-2002 91731 035 ****61.25



DO NOT WRITE IN THIS SPACE

CR2E037 (9/01)