

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 01, 2001 8:00 am**  
**Secretary of State**

05-01-2001 90089 036 \*\*\*158.75



DO NOT WRITE IN THIS SPACE

**DOCUMENT # 467753**

1. Entity Name  
**D.S. EAKINS CONST. CORP.**

Principal Place of Business <b>300 WEST TENTH ST.          RIVIERA BCH. FL 33404</b>	Mailing Address <b>P O BOX 9818          RIVIERA BEACH FL 33419          US</b>
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2. Principal Place of Business <b>1481 KINETIC ROAD</b>	3. Mailing Address <b>POST OFFICE BOX 12185</b>
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State <b>LAKE PARK, FLORIDA</b>	City & State <b>LAKE PARK, FLORIDA</b>
Zip <b>33403</b>	Zip <b>33403</b>
Country <b>USA</b>	Country <b>USA</b>

4. FEI Number <b>59-1691997</b>	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input checked="" type="checkbox"/> <b>\$8.75 Additional Fee Required</b>
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6. Name and Address of Current Registered Agent

**EAKINS, SANDI F.  
 300 WEST TENTH ST.  
 RIVIERA BCH. FL 33404**

7. Name and Address of New Registered Agent

Name  
 Street Address (P.O. Box Number is Not Acceptable)  
**1481 KINETIC ROAD**  
 City  
**LAKE PARK** **FL** Zip Code  
**33403**

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.

**D. S. EAKINS CONSTRUCTION CORPORATION**  
 SIGNATURE BY: *[Signature]* **CEO** **4/21/01**  
Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) <input type="checkbox"/>	<b>FILE NOW!!! FEE IS \$150.00</b> <b>After MAY 1, 2001 Fee will be \$550.00</b> <b>Make Check Payable to Department of State</b>	10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
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11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD EAKINS, DOUGLAS S. 300 WEST TENTH ST. RIVIERA BCH. FL	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO EAKINS, SANDI F. 300 WEST TENTH ST. RIVIERA BCH. FL	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D EAKINS, SANDI F 300 WEST 10TH ST RIVIERA BEACH FL	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPSD FRICK, CINDI M 300 WEST 10TH ST RIVIERA BCH FL	<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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD EAKINS, DOUGLAS S. 1481 KINETIC ROAD LAKE PARK, FLORIDA 33403	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO SANDI F. EAKINS 1481 KINETIC ROAD LAKE PARK, FLORIDA 33403	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SANDI F. EAKINS 1481 KINETIC ROAD LAKE PARK, FLORIDA 33403	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPSD CINDI M. FRICK 1481 KINETIC ROAD LAKE PARK, FLORIDA 33403	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

**D. S. EAKINS CONSTRUCTION CORPORATION**  
 SIGNATURE BY: *[Signature]* **CEO** **4/21/01** **(561) 842-0001**  
Signature AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)