

**FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00**

**FILED**

**Feb 05 1998 8:00am  
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # 294863 (6)**  
1. Corporation Name  
**WATKINS ENGINEERS & CONSTRUCTORS, INC.**

Principal Place of Business 1238 AIRPORT DRIVE TALLAHASSEE FL 32304	Mailing Address 1238 AIRPORT DRIVE TALLAHASSEE FL 32304
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified <b>07/14/1965</b>	
21	22	26	27	4. FEI Number <b>59-1100102</b>	Applied For <input type="checkbox"/> Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
23	24	28	29	30	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Zip		Country		Zip	
25	29	30			

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
SKINNER, THOMAS D 1238 AIRPORT DR TALLAHASSEE FL 32304				81 Name			
				82 Street Address (P.O. Box Number is Not Acceptable)			
				83			
				84 City			85 Zip Code
				<b>FL</b>			

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	V <input type="checkbox"/> DELETE	1.1 TITLE	PD <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	WATKINS, E M JR	1.2 NAME	Edward Henry Clay III
STREET ADDRESS	1238 AIRPORT DRIVE	1.3 STREET ADDRESS	1238 Airport Dr
CITY-ST-ZIP	TALLAHASSEE, FL 00000	1.4 CITY-ST-ZIP	Tallahassee, FL 32304
TITLE	S <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SKINNER, THOMAS D	2.2 NAME	
STREET ADDRESS	1238 AIRPORT DRIVE	2.3 STREET ADDRESS	
CITY-ST-ZIP	TALLAHASSEE, FL 00000	2.4 CITY-ST-ZIP	
TITLE	V <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	NEVIN, GEORGE F	3.2 NAME	
STREET ADDRESS	1238 AIRPORT DRIVE	3.3 STREET ADDRESS	
CITY-ST-ZIP	TALLAHASSEE, FL 00000	3.4 CITY-ST-ZIP	
TITLE	P <input checked="" type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SUNDGREN, D. E.	4.2 NAME	
STREET ADDRESS	1238 AIRPORT DRIVE	4.3 STREET ADDRESS	
CITY-ST-ZIP	TALLAHASSEE, FL 00000	4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

**SIGNATURE: \_\_\_\_\_ SIGNATURE REQUIRED**

1-30-98 830-574-7816

CR2E034 (10/97)