

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 294863

1. Entity Name

WATKINS ENGINEERS & CONSTRUCTORS, INC.

FILED
May 08, 2000 8:00 am
Secretary of State

05-08-2000 90211 029 ***150.00

Principal Place of Business

Mailing Address

1238 AIRPORT DRIVE
TALLAHASSEE FL 32304

1238 AIRPORT DRIVE
TALLAHASSEE FL 32303-1001

2. Principal Place of Business

2101 Maryland Circle

3. Mailing Address

2101 Maryland Circle

Suite, Apt. #, etc.

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State
Tallahassee, FL

City & State
Tallahassee, FL

4. FEI Number 59-1100102

Applied For
Not Applicable

Zip 32303

Country USA

Zip 32303

Country USA

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

YEARY, SCOTT
147 CATILLION CIRCLE
TALLAHASSEE FL 32312

Name

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

2101 Maryland Circle

City

Tallahassee

FL

Zip Code

32303

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

Scott Yearly

Scott Yearly, Vice President

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) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE V
NAME WATKINS, E M JR
STREET ADDRESS 1238 AIRPORT DRIVE
CITY-ST-ZIP TALLAHASSEE FL ☐ Delete

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE V
NAME SKINNER, THOMAS D
STREET ADDRESS 1238 AIRPORT DRIVE
CITY-ST-ZIP TALLAHASSEE FL ☐ Delete

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE V
NAME NEVIN, GEORGE F
STREET ADDRESS 1238 AIRPORT DRIVE
CITY-ST-ZIP TALLAHASSEE FL ☐ Delete

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D
NAME SUNDGREN, D. E.
STREET ADDRESS 1238 AIRPORT DRIVE
CITY-ST-ZIP TALLAHASSEE FL ☐ Delete

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE P
NAME AARON, EDDIE L
STREET ADDRESS 1238 AIRPORT DRIVE
CITY-ST-ZIP TALLAHASSEE FL 32304 ☐ Delete

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VT
NAME YEARY, SCOTT
STREET ADDRESS 147 CATILLION CIRCLE
CITY-ST-ZIP TALLAHASSEE FL 32312 ☐ Delete

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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.

SIGNATURE:

Scott Yearly
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

(850) 576-7181

CR2E034 (9/99)