

**2000 UNIFORM BUSINESS REPORT (UBR)****FILED**  
**Feb 10, 2000 8:00 am**  
**Secretary of State**

02-10-2000 90059 033 \*\*\*150.00

**DOCUMENT # 462449**

1. Entity Name

**R. KEN BOYKIN & ASSOCIATES, INC.**

Principal Place of Business

Mailing Address

**9349 EAST TOM COSTINE ROAD  
LAKELAND FL 33809****9349 EAST TOM COSTINE ROAD  
LAKELAND FL 33809-1654**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City &amp; State

City &amp; State

4. FEI Number: **59-1552042**☐ Applied For  
☐ Not Applicable

Zip

Country

Zip

Country

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

**BOYKIN, R. KEN,  
9349 EAST TOM COSTINE ROAD  
LAKELAND FL 33809**Name **Jacque L Boykin**Street Address (P.O. Box Number is Not Acceptable)  
**9349 East Tom Costine Road**City **Lakeland** **FL** Zip Code **33809-1654**

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

**2/3/2000**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	NAME	STREET ADDRESS	CITY-ST-ZIP	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
PD	BOYKIN, R KEN	9349 EAST TOM COSTINE ROAD	LAKELAND FL 33809	PD	Boykin, Jacque L	9349 East Tom Costine Road	Lakeland, FL 33809-1654
STD	BOYKIN, JACQUE L	9349 EAST TOM COSTINE ROAD	LAKELAND FL 33809	STD	Kennette B Hayter	2212 S W 79th Drive	Gainesville, FL 32607
VD	BOYKIN, MICHAEL W	2747 ALDINE CIRCLE	LAKELAND FL 33801				

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**Jacque L Boykin, Secy-Treas**

2/3/2000

863-665-1509

CR2E034 (9/99)