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

PROFIT CORPORATION **ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

CITY-ST-ZIP

14. I hereby certify that the information indicated on this annual report or officer or director of the corporation Block 12 or Block 13 if charged, or

DOCUMENT # 842640

(5)

WATKINS ASSOCIATED DEVELOPERS, INC.

Principal Place of Business Mailing Address				
1958 MONROE DRIVE NE ATLANTA GA 30324	1958 MONROE DRIVE NE ATLANTA GA 30324		DO NOT WRITE IN THIS	SPACE
			3. Date Incorporated or Qualified	
			02/20/1979	
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For
1	26		58-1341051	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country 25	7ip (Country	This corporation owes or has paid the current Personal Property Tax due June 30.	urrent year Intangible
9. Name and Address of (Current Registered Agent		10. Name and Address of New Registered	Agent
CT CORPORATION SYSTEM		81 Name		
1200 \$. PINE ISLAND ROAD PLANTATION FL 33324			dress (P.O. Box Number is Not Acceptable)	
		83		
		84 City	E	85 Zip Code

FILED Apr 27 1998 8:00am Secretary of State



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 Signature, typed or printed name of registered agent and tick if applicable (NOTE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. ☐ DELETE Change Addition TITLE 1.1 TALE FREEMAN, W. NEAL NAME 1.2 NAME 1946 MONROE DR. N.E. STREET ADDRESS 1.3 STREET ADDRESS **A**TLANTA GA CITY-ST-ZIP 1.4 C(TY-ST-ZIP DELETE TITLE 2.1 TITLE Change Addition NAME READY, GEORGE W JR 2.2 NAME 1958 MONROE DR NE STREET ADDRESS 2.3 STREET ADDRESS ATLANTA, GA 00000 CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE ☐ Change ☐ Addition FREEMAN, WILLIAM A NAME 1958 MONROE DR NE STREET ADDRESS 3.3 STREET ADDRESS ATLANTA, GA 00000 CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE TITLE Change Addition 4.1 TITLE WATKINS, BILL NAME 4 2 NAME 1144 W GRIFFIN RD STREET ADDRESS 4 3 STREET ADDRESS LAKELAND FL CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE TITLE Change Addition 51 TITLE HERRING, W.T. NAME 5.2 NAME **1946 MONROE DRIVE N.E.** STREET ADDRESS 5.3 STREET ADDRESS ATLANTA GA CITY-ST-ZIP 5.4 CiTY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

pupiled with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information implemental 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 or the receiver or trustee amplywered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

(404) 872-3841