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PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

GQ4267

131

1. Corporation N	TKINS ENTERPRISES, INC		(0)						
Principal Place of Business ** ROBERT B. ATKINS. JR. 2700 WESTHALL LANE MAITLAND FL 32751		Muiling Address * ROBERT B. ATKINS, JR. 2700 WESTHALL LANE MAITLAND FL 32751							
		WAITE	WAITERING TE OZIOT			3. Date Incorporated or Qualified 04/02/1984			Last Report 27/1995
2. Principal Plac	e of Business	2a. Mailing Ad	ddress			4. FEI Number 59-2388777			Applied For Not Applicable
Suite, Apt. #,	etc.	Suite Apl	t. #, etc.			5. Certificate of Status Desired			Additional Required
City & State		City & Sta	ate			Election Campaign Financing Trust Fund Contribution		-	0 May Be d to Fees
Ζ ₁ ρ	Country 25	Ζ() 29	Co	untry		****	s 🔲 No		199.032,
	9. Name and Address of Current	Registered Age	nt	81	Misses	10. Name and Address of New	Registered	Agent	
ATVINIC	BARCOT R ID			82	Name ————				
	, ROBERT B., JR. ESTHALL LANE					ress (P.O. Box Number is Not Acceptable)			
	ND FL 32751								•
				84	City		FI	85 Z ₁	p Code
or registered familiar with	d agent, or both, in the State of Fiorid, and accept the obligations of, Sector grature typed or purbational of registrist about OFFICERS AND	a Such change won 607,0505. Flori	as authorized by the ida Statutes.	Corpo eo Agent	ration's boa	ation submits this statement for the p of directors. I hereby accept the ap the resisting. ADDITIONS/CHANGES TO OF	pointment as	s registered	lagent Lani
TITLE	DP		DELETE 1.1	TifLE				Change	Addition
NAME	ATKINS, ROBERT B., SR.		12	NAME					
STREET ADDRESS	2700 WESTHALL LANE			STREET					
CITY - ST - ZIP	MAITLAND FL OVP	<u></u>		CHY-ST THUE	- 7iP	A/M/15 1-14 11 projecting		☐ Change	Addition .
TITLE NAME	ATKINS, ROBERT B., JR.			NAME				☐ Guange	[] Addiny
STREET ADDRESS	2700 WESTHALL LANE			STREET A	ADORESS.				
CITY-ST-ZIP	MAITLAND FL			CITY-ST					
TITLE				TifteE				☐ Change	Addition
NAME			32	NAME					
STREET ADDRESS			33	STHEET	RESPROCA				
CiTY+ST+ZIP			34	CITY-SI	ZIP			Character Character	- Addition
TITLE		LJ	1	TILLE	į			Change	Addition Addition
NAME STREET ADORESS				NAME CTOCCT :	ADDRESS				
CITY-ST-ZIP				CITY-SI					
TIBLE				TITLE	20			Criange	☐ Addition
NAME			52	NAME					
STREET ADDRESS			53	STHEET	ADDRESS				
CITY-ST-ZIP	4		5.4	CITY - SI	- 7IP				
TITLE			DELETE 6.1	TITLE				☐ Change	☐ Addition
NAME				NAME					
STREET ADDRESS					ADDRESS				
CITY-S1-ZIP	partiful that the information apparties to	with this feets in		CITY-SI		for the exemption stated in Section 11	0.07/3VL) EI	orida Statu	tas I further
certify that t oath_that I	the information indicated on this annu am an officer or director of the corpor Block 12 or Block 13 if changes, or o	al report or supple ration or the recei	ema ek'ak2 ennual record	t is trui	e and accura	ate and that my signature shall have this report as required by Chapter 607,	ie same lega	u e⁴tect as i	it made under

SIGNATURE:,

FFICER OR DIRECTOR ROSSERF & Atlans To. 5/2/91 407-875-8010