## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J29303

Entity Name: THE BARKIN COMPANY

FILED Jan 09, 2004 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

7578 REGENCY LAKE DR 13200 W NEWBERRY ROAD BOCA RATON, FL 334336969 US

BB-152

NEWBERRY, FL 326692773 US

**Current Mailing Address: New Mailing Address:** 

7578 REGENCY LAKE DR 13200 W NEWBERRY ROAD BOCA RATON, FL 334336969 US

BB-152

NEWBERRY, FL 326692773 US

FEI Number: 04-2814430 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BARKIN, SHIRLEY W BARKIN, SHIRLEY W. 7578 REGENCY LAKE DR 13200 W NEWBERRY ROAD

BOCA RATON, FL 33433 BB-152

NEWBERRY, FL 326692773 US

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: 01/09/2004

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Address:

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete Title: (X) Change ( ) Addition BARKIN, SHIRLEY W., Name: Name: BARKIN, SHIRLEY W.,

7578 REGENCY LAKE DR 13200 W NEWBERRY ROAD Address: BOCA RATON, FL City-St-Zip: NEWBERRY, FL 326692773 US

Title: Title: (X) Change ( ) Addition () Delete Name: BARKIN, SHIRLEY W. Name: BARKIN, SHIRLEY W.,

7578 REGENCY LAKE DR 13200 W NEWBERRY ROAD Address: Address: BOCA RATON, FL NEWBERRY, FL 326692773 US City-St-Zip: City-St-Zip:

Title: Title: (X) Change ( ) Addition ( ) Delete VΡ

BARKIN, RICHARD D BARKIN, RICHARD B Name: Name: 7578 REGENCY LAKE DRIVE 13200 W NEWBERRY ROAD Address: Address: City-St-Zip: BOCA RATON, FL 33433 City-St-Zip: NEWBERRY, FL 326692773 US

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SHIRLEY W BARKIN **PST** 01/09/2004