2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 30, 2004 08:00 AM Secretary of State

1. Entity Nam	MENT # K71178 TKINS CO., INC.	·····································			
Principal Place of Business Mailing Address 1671 ST. CLAIR AVENUE 1671 ST. CLAIR AVENUE NORTH FORT MYERS, FL 33903 NORTH FORT MYERS, FL 33903					
DO NOT WRITE IN THIS SPACE 6. Name and Address of Current Registered Agent				04222004 4. FEI Numb 65-010	
WATKINS, ROGER D. 1671 ST. CLAIR AVENUE NORTH FORT MYERS, FL 33903			DO NOT WRITE IN THIS SPACE		
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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Squarue, typed or privide name of registered agent and title if applicable. (NOTE: Registered Agent squarue required when rensistance) DATE					
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution.				.00 May Be ded to Fees	000000143815 04/30/04-80107-003 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD WATKINS, ROGER D. 1671 ST. CLAIR AVE. NO. FT. MYERS, FL	TORS			
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12. I hereby certify that the information supplied with this filling 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, Rorida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					

ROGER D. WATKINS

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: