


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

Jul 2

**CORPORATION
REINSTATEMENT**

 **FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS**

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # MW6738

1. Corporation Name
WATKINS Properties, INC.

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04/24/03--01083--014 **300.00

02-03 ubf

2. Principal Office Address <i>541 KINGFISH ROAD</i>		3. Mailing Office Address <i>541 KINGFISH ROAD</i>	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State <i>NORTH PALM BEACH, FL</i>		City & State <i>NORTH PALM BEACH, FL</i>	
Zip <i>33408</i>	Country <i>USA</i>	Zip <i>33408</i>	Country <i>USA</i>

4. Date Incorporated or Qualified To Do Business in Florida <i>1-27-1988</i>	
5. FEI Number <i>650068821</i>	Applied For <input type="checkbox"/> Not Applicable
6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$375 Additional Fee required for a Certificate of Status	

7. Name and Address of Current Registered Agent	
Name <i>KENNETH GILLESPIE</i>	
Street Address (P.O. Box Number is Not Acceptable) <i>721 U.S. HIGHWAY #1</i>	
Suite, Apt. #, Etc. <i>Suite 121</i>	
City <i>NORTH PALM BEACH, FLORIDA</i>	State FL
	Zip Code <i>33408</i>

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.	
Signature of Registered Agent <i>X Kenneth Gillespie</i>	Date <i>X March 20, 2003</i>
REGISTERED AGENT MUST SIGN	

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)			
Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
<i>PRES</i>	<i>CHARLES N. WATKINS</i>	<i>541 KINGFISH RD</i>	<i>NORTH PALM BEACH, FL</i>

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.	
SIGNATURE: <i>Charles N. Watkins</i>	<i>3-20-03 (561) 882-0740</i>
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	Date Daytime Phone #

CR2E081 (10/02)



WATKINS PROPERTIES, INC.

Office: 561 Kingfish Road North Palm Beach, Florida 33408

Phone and Fax Number: (561) 844-9931 Beeper: (561) 551-1030

March 20, 2003

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, Florida 32314

Subject: Reinstatement of Watkins Properties Inc. M66758

Dear Mrs. Milligan,

I did not receive my renewal notice for the annual Corporation fee for year 2002. For economic reasons, I closed my office located at 918 Park Ave, Lake Park, Florida 33403 and moved the office to my home located at 541 Kingfish Road, North Palm Beach, Florida 33408. When I called your office to inquire as to why I did not receive my 2002 renewal notice, you advised my old office address was still in your computers. As per your suggestion, I am writing to explain the failure of not receiving last year renewal, and not submitting payment for same. This mistake was inadvertent, and I am asking your consideration to eliminate the late penalty for me not filing the year of 2002, and accept my enclosed check for \$300.00 to pay 2002 and the current year of 2003.

Respectfully,

Charles N Watkins
President