

**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Feb 22, 2007 8:00 am**  
**Secretary of State**

02-22-2007 90028 043 \*\*\*150.00

**DOCUMENT # P00000028113**

1. Entity Name

B. WATKINS OFFICE & FINANCIAL SERVICES INC.



Principal Place of Business

523 S FLORIDA AVE #160 523 W. BELHAR ST.  
LAKELAND, FL 33803

Mailing Address

523 S FLORIDA AVE #160  
LAKELAND, FL 33803  
P.O. Box 2712  
LAKELAND FL 33806

60018308



02122007 No Chg-P CR2E034 (11/05)

4. FEI Number

59-3517147

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

**DO NOT WRITE IN THIS SPACE**

6. Name and Address of Current Registered Agent

WATKINS, BARBARA F  
523 W BELHAR ST BELMAR  
LAKELAND, FL 33806  
33806

**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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD  
NAME WATKINS, BARBARA F  
STREET ADDRESS PO BOX 2712  
CITY-ST-ZIP LAKELAND, FL 33806

TITLE  
NAME  
STREET ADDRESS  
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STREET ADDRESS  
CITY-ST-ZIP

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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, Florida 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.

**SIGNATURE:**

*Barbara F. Watkins* BARBARA F. WATKINS 2/12/07

Date

863-686-6931

Daytime Phone #