2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

Feb 13, 2006 08:00 AM **Secretary of State** DOCUMENT # P02000000576 1. Entity Name WATKINS CONSULTING, P.A. Principal Place of Business Mailing Address 610 SOUTH BLVD STE 100 610 SOUTH BLVD STE 100 TAMPA, FL 33606 TAMPA, FL 33606 01082006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied (30-0011251 Not Appli \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent LOPEZ, ALR JR DO NOT WRITE 4600 WEST CYPRESS STREET STE 500 TAMPA, FL 33607 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 account of the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and account of the purpose of changing its registered office or registered agent, or both, in the State of Florida. the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstaling) \$5.00 May Bq U000004301**68** 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 /22/06-80**037-008** 150.00 · 🗖 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS DPTITLE NAME WATKINS, NANCY H CPA STREET ADDRESS 610 SOUTH BLVD STE 100 CRTY-ST-ZRP TAMPA, FL 33606 WE NAME STREET ADDRESS CITY-ST-ZIP THE NAME STREET ADDRESS DO NOT WRITE City-S1-119 TITLE IN THIS SPACE NAME STREET ACCRESS CITY-ST-ZIF TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling 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 uniformation or the receiver or trustee empowered to execute this report as required by Chapter 507, Florida Statutes; and that my name appears in Block 10 or Block changed, or on an attachment with an address, with all other like empowered.

NANCY H. WATKING

FILED