

**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Feb 15, 2006 08:00 AM**  
**Secretary of State**

DOCUMENT # P02000063211

1. Entity Name  
ATKINS CONSTRUCTION CORPORATION



Principal Place of Business  
12995 S. CLEVELAND AVENUE STE 258  
FORT MYERS, FL 33907 US

Mailing Address  
12995 S. CLEVELAND AVENUE STE 258  
FORT MYERS, FL 33907 US



02072006 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
02-0620557

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

ATKINS, JAMES H  
19243 VINTAGE TRACE CIRCLE  
FORT MYERS, FL 33912

**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 re-registering)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

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

**10. OFFICERS AND DIRECTORS**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
PTD  
ATKINS, JAMES H  
19243 VINTAGE TRACE CIRCLE  
FORT MYERS, FL 33912

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
S  
ATKINS, MARGARET  
19243 VINTAGE TRACE CIRCLE  
FORT MYERS, FL 33912

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

U00000435529  
02/25/06-80044-017 150.00

**DO NOT WRITE  
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:

2/13/06 239-481-8819