

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000063211

FILED
Mar 23, 2009
Secretary of State

Entity Name: ATKINS CONSTRUCTION CORPORATION

Current Principal Place of Business:

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

New Principal Place of Business:

19243 VINTAGE TRACE CIRCLE
FORT MYERS, FL 33967 US

Current Mailing Address:

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

New Mailing Address:

19243 VINTAGE TRACE CIRCLE
FORT MYERS, FL 33967 US

FEI Number: 02-0620557

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

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

Name and Address of New Registered Agent:

ATKINS, JAMES H
19243 VINTAGE TRACE CIRCLE
FORT MYERS, FL 33967 US

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.

SIGNATURE:

03/23/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: ATKINS, JAMES H
Address: 19243 VINTAGE TRACE CIRCLE
City-St-Zip: FORT MYERS, FL 33912

Title: S () Delete
Name: ATKINS, MARGARET
Address: 19243 VINTAGE TRACE CIRCLE
City-St-Zip: FORT MYERS, FL 33912

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change () Addition
Name: ATKINS, JAMES H
Address: 19243 VINTAGE TRACE CIRCLE
City-St-Zip: FORT MYERS, FL 33967

Title: S (X) Change () Addition
Name: ATKINS, MARGARET
Address: 19243 VINTAGE TRACE CIRCLE
City-St-Zip: FORT MYERS, FL 33967

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JAMES H. ATKINS

PTD

03/23/2009

Electronic Signature of Signing Officer or Director

Date