

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000067003

Entity Name: DOCKINS INC

FILED
Mar 17, 2008
Secretary of State

Current Principal Place of Business:

2001 OLD ST AUGUSTINE RD
204
TALLAHASSEE, FL 32301 US

New Principal Place of Business:

2490 NUGGET LN
TALLAHASSEE, FL 32303 US

Current Mailing Address:

2001 OLD ST AUGUSTINE RD
204
TALLAHASSEE, FL 32301 US

New Mailing Address:

P O BOX 21289
TALLAHASSEE, FL 32316 US

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DOCKINS, DANNI P
2001 OLD ST AUGUSTINE RD
204
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

DOCKINS, DANNI P
2490 NUGGET LN
TALLAHASSEE, FL 32303 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: DANNI P DOCKINS

03/17/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CEO () Delete
Name: DOCKINS, DANNI P
Address: 2001 OLD ST AUGUSTINE RD
City-St-Zip: TALLAHASSEE, FL 32301 US

Title: CFO () Delete
Name: DOCKINS, DANNI P
Address: 2001 OLD ST AUGUSTINE RD
City-St-Zip: TALLAHASSEE, FL 32301 US

Title: SECR () Delete
Name: DOCKINS, DANNI P
Address: 2001 OLD ST AUGUSTINE RD
City-St-Zip: TALLAHASSEE, FL 32301 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO (X) Change () Addition
Name: DOCKINS, DANNI P
Address: 2490 NUGGET LN
City-St-Zip: TALLAHASSEE, FL 32303 US

Title: CFO (X) Change () Addition
Name: DOCKINS, DANNI P
Address: 2490 NUGGET LN
City-St-Zip: TALLAHASSEE, FL 32303 US

Title: SECR (X) Change () Addition
Name: DOCKINS, DANNI P
Address: 2490 NUGGET LN
City-St-Zip: TALLAHASSEE, FL 32303 US

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: DANNI P DOCKINS

CEO

03/17/2008

Electronic Signature of Signing Officer or Director

Date