

2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 06, 2005 8:00 am
Secretary of State

04-06-2005 90103 010 ***150.00

DOCUMENT # P96000020342

1. Entity Name

SKIP WATKINS AND ASSOCIATES, INC



Principal Place of Business

**13274 113TH AVENUE NORTH
LARGO FL 34644**

Mailing Address

**13274 113TH AVENUE NORTH
LARGO FL 33774**

2. Principal Place of Business

5576 Rio Vista Dr

Suite, Apt. #, etc.

3. Mailing Address

127 Valencia Circle

Suite, Apt. #, etc.

City & State
CLW FL

Zip
33760

Country
Pinellas

City & State
ST Pete, FL

Zip
33716

Country
Pinellas

4. FEI Number
59-3366164

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**WATKINS, GLENN G
13274 - 113TH AVENUE NORTH
LARGO FL 33644**

7. Name and Address of New Registered Agent

Name
WATKINS GLENN G
Street Address (P.O. Box Number is Not Acceptable)
127 Valencia Circle
ST Petersburg
City
FL Zip Code
33716

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 **Glenn G WATKINS**

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

(NOTE: Registered Agent signature required when reinstating)

DATE

4/1/05

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee Will Be \$550.00
Make Check Payable to Florida Department of State

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
D
WATKINS, GLENN G
13274 113TH AVENUE NORTH
LARGO FL 34644 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
WATKINS, DOROTHY F
13274 113TH AVE
LARGO FL 33774 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

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11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: **Glenn G WATKINS**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-1-05 727-533-8800

Date Daytime Phone #