

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 03, 2007 8:00 am
Secretary of State

05-03-2007 90039 045 ***150.00

DOCUMENT # P98000056118

1. Entity Name
PERKINS & COMPANY, INC.



Principal Place of Business
**4228 NANCY CREEK BOULEVARD
BROOKSVILLE, FL 34602**

Mailing Address
**4228 NANCY CREEK BOULEVARD
BROOKSVILLE, FL 34602**



04302007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3519883	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**YOUR BUSINESS MATTERS II, INC.
9211 BRADY ST
SPRING HILL, FL 34608**

**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 reinstating) DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 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	D PERKINS, DOUGLAS S 4228 NANCY CREEK BOULEVARD BROOKSVILLE, FL 34602
TITLE NAME STREET ADDRESS CITY - ST - ZIP	ST PERKINS, GLORIA 4228 NANCY CREEK BOULEVARD BROOKSVILLE, FL 34602
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	

**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: *Don Perkins*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/1/2007
Date

Daytime Phone #