

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S48003

FILED
Mar 11, 2008
Secretary of State

Entity Name: ADKINS AND ASSOCIATES, INC.

Current Principal Place of Business:

2222 PONCE DELEON BLVD
6TH FLOOR
CORAL GABLES, FL 33134

New Principal Place of Business:

2 ALHAMBRA PLAZA
SUITE 740
CORAL GABLES, FL 33134

Current Mailing Address:

2222 PONCE DELEON BLVD
6TH FLOOR
CORAL GABLES, FL 33134

New Mailing Address:

2 ALHAMBRA PLAZA
SUITE 740
CORAL GABLES, FL 33134

FEI Number: 59-3104460

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ADKINS, JON S MR
2222 PONCE DE LEON BLVD
6TH FLOOR
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

ADKINS, JON S MR
2 ALHAMBRA PLAZA
SUITE 740
CORAL GABLES, FL 33134 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:

03/11/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ADKINS, JON S
Address: 2843 S. BAYSHORE DR. #16-E
City-St-Zip: MIAMI, FL 33133

Title: VP () Delete
Name: PHILLIPS, JOELLEN
Address: 372 DELEON DR
City-St-Zip: MIAMI SPRINGS, FL 33166

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: ADKINS, JON S
Address: 2843 S. BAYSHORE DR. #16-E
City-St-Zip: MIAMI, FL 33133

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JON S ADKINS

PD

03/11/2008

Electronic Signature of Signing Officer or Director

Date