

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2004 08:00 AM
Secretary of State

DOCUMENT # V46709 1. Entity Name R & D WATKINS ENTERPRISES, INC. I		
Principal Place of Business 1671 ST CLAIR AVE E N FT MYERS, FL 33903	Mailing Address 1671 ST CLAIR AVE E N FT MYERS, FL 33903	
DO NOT WRITE IN THIS SPACE		
<div style="text-align: right;">  04222004 No Chg-P CR2E034 (10/03) </div>		
4. FEI Number 65-0343295		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 WATKINS, ROGER D. 1671 ST CLAIR AVE E N FT MYERS, FL 33903	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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>		
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
<div style="text-align: right;"> 000000143817 04/30/04-80107-004 150.00 </div>		
DO NOT WRITE IN THIS SPACE		
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD WATKINS, ROGER D. 1671 ST CLAIR AVE E N FT MYERS, FL	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S WATKINS, DORIS M. 1671 ST CLAIR AVE E N FT MYERS, FL	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE IN THIS SPACE	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		
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: <u>Roger D. Watkins</u> ROGER D. WATKINS APRIL 26, 04 239-995-7464 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR PRES. Date Daytime Phone #</small>		