

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000027035

Entity Name: AADKINS, INC.

Current Principal Place of Business:

4806 SAN JUAN AVE
JACKSONVILLE, FL 32210

Current Mailing Address:

4806 SAN JUAN AVE
JACKSONVILLE, FL 32210 US

FEI Number: 59-3218535

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CLARK, ROBERT E
870 CRESSWELL LANE WEST
JACKSONVILLE, FL 32221 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: _____

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title VPD
Name CLARK, ROBIN M
Address 870 CRESSWELL LANE WEST
City-State-Zip: JACKSONVILLE FL 32221

Title P
Name CLARK, ROBERT E
Address 870 CRESSWELL LANE WEST
City-State-Zip: JACKSONVILLE FL 32221

Title SD
Name CLARK, ROBERT A
Address 870 CRESSWELL LANE WEST
City-State-Zip: JACKSONVILLE FL 32221

Title SD
Name CLARK, MICHELLE R
Address 870 CRESSWELL LANE WEST
City-State-Zip: JACKSONVILLE FL 32221

I hereby 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 all other like empowered.

SIGNATURE: ROBERT CLARK

P

04/08/2015

Electronic Signature of Signing Officer/Director Detail

Date