


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan-07, 2004 08:00 AM
Secretary of State

DOCUMENT # K05665
1. Entity Name
HAWKINSON ENTERPRISES, INC.



Principal Place of Business Mailing Address
1582 GREENLEA DRIVE **1582 GREENLEA DR.**
CLEARWATER, FL 33755 US **CLEARWATER, FL 33755 US**

DO NOT WRITE IN THIS SPACE



01052004 No Chg-P CR2E034 (10/03)

4. FEI Number Applied For
59-2859124 Not Applicable

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

6. Name and Address of Current Registered Agent
GASSMAN, ALAN J.
1212 COURT STREET, STE B
CLEARWATER, FL 33756

**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 _____ DATE _____
Signature, typed or printed name of registrant agent and title, if applicable. (FEE: Registered Agent signature required when registering)

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	HAWKINSON, RAYMOND J.
STREET ADDRESS	1582 GREENLEA DR
CITY ST ZIP	CLEARWATER, FL 33755
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	

U000000000097
01/07/04-80006-014 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(c), 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: Raymond J. Hawkinson January 5, 2004
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE OF FILING