

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N12000002916

**FILED**  
**Apr 03, 2013**  
**Secretary of State**  
**CC5669175847**

**Entity Name:** HAWKS COVE HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

2242 HAWKS COVE CIRCLE  
NEW SMYRNA BEACH,, FL 32168

**Current Mailing Address:**

1326 S. RIDGEWOOD AVE. #14  
DAYTONA BEACH, FL 32114 US

**FEI Number:** 49-1159870

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

CLIFTON, SHERRY K  
1326 S. RIDGEWOOD AVE. #14  
DAYTONA BEACH, FL 32114 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:** SHERRY K CLIFTON

04/03/2013

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name FOLMSBEE, RONALD  
Address 2242 HAWKS COVE CIRCLE  
City-State-Zip: NEW SMYRNA BEACH FL 32168

Title SECRETARY  
Name FINN, TOM  
Address 2229 HAWKS COVE CIRCLE  
City-State-Zip: NEW SMYRNA BEACH FL 32168

Title VP  
Name MANICOME, CONNIE  
Address 2237 HAWKS COVE CIRCLE  
City-State-Zip: NEW SMYRNA BEACH FL 32168

Title T  
Name HATFIELD, CHARLES  
Address 2235 HAWKS COVE CIRCLE  
City-State-Zip: NEW SMYRNA BEACH FL 32168

Title D  
Name MULLINEX, JERRY  
Address 2262 HAWKS COVE CIRCLE  
City-State-Zip: NEW SMYRNA BEACH FL 32138

*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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** RONALD FOLMSBEE

PRES

04/03/2013

Electronic Signature of Signing Officer/Director Detail

Date