

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Myltham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 132438

(3)

1. Corporation Name

HAWTHORNE INDUSTRIES, INC.

FILED
95 JAN 27 PM 3:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE.

Principal Place of Business		Mailing Address	
3114 TUXEDO AVE. WEST PALM BEACH FL 33405		3114 TUXEDO AVE. WEST PALM BEACH FL 33405	
2. Principal Place of Business		2a. Mailing Address	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.	
22 City & State		27 City & State	
23 Zip		28 Zip	
24 Country		29 Country	
25		30	

3. Date Incorporated or Qualified	3a. Date of Last Report
05/25/1936	01/24/1994
4. FEI Number	Applied For
59-0285881	Not Applicable
5. Certificate of Status Desired	\$8.75 Additional Fee Required
☐	
6. Election Campaign Financing	\$5.00 May Be Added to Fees
Trust Fund Contribution	☐
7. This corporation has liability for intangible tax under S. 199.032, Florida Statutes	☐ Yes ☐ No

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
HURD, JAMES M. 3114 TUXEDO AVE WEST PALM BEACH FL 33405		81 Name	
		82 Street Address (P.O. Box Number is Not Acceptable)	
		83	
		84 City	
		FL 85 Zip Code	

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when restoring)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	TREASURER/PRESIDENT/D. ☐ Change ☒ Addition
NAME	HURD, JAMES M.	1.2 NAME	HURD, JAMES M.
STREET ADDRESS	3114 TUXEDO AVE	1.3 STREET ADDRESS	3114 TUXEDO AVENUE
CITY-ST-ZIP	WEST PALM BEACH FL	1.4 CITY-ST-ZIP	WEST PALM BEACH, FL. ADD ☐ Change ☐ Addition
TITLE	VD	2.1 TITLE	
NAME	HURD, ROBERT G.	2.2 NAME	
STREET ADDRESS	3114 TUXEDO AVE	2.3 STREET ADDRESS	
CITY-ST-ZIP	WEST PALM BEACH FL	2.4 CITY-ST-ZIP	
TITLE	SD	3.1 TITLE	☐ Change ☐ Addition
NAME	STANFIELD, JAMES G.	3.2 NAME	
STREET ADDRESS	3114 TUXEDO AVENUE	3.3 STREET ADDRESS	
CITY-ST-ZIP	WEST PALM BEACH FL	3.4 CITY-ST-ZIP	
TITLE	T	4.1 TITLE	TREASURER ☒ Change ☐ Addition
NAME	MCLELLAN, RENALDO	4.2 NAME	MCLELLAN, RENALDO
STREET ADDRESS	3114 TUXEDO AVENUE	4.3 STREET ADDRESS	3114 TUXEDO AVENUE
CITY-ST-ZIP	WEST PALM BEACH FL	4.4 CITY-ST-ZIP	WEST PALM BEACH, FL. DELETE ☐ Change ☐ Addition
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 1 (0.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 007, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an addition.

SIGNATURE:

SIGNATURE AND TYPED NAME OF SIGNING OFFICER OR DIRECTOR

1/23/95 (407) 684-8400

Date

Daytime Phone #