

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Feb 24, 1999 8:00 am
Secretary of State

02-24-1999 90115 050 ***150.00

0022506

DOCUMENT # 603079

1. Corporation Name

T. JACK HAWKINS ENTERPRISES, INC.

Principal Place of Business

767 WINDERMERE WAY
PALM BEACH GARDENS FL 33418
US

Mailing Address

767 WINDERMERE WAY
PALM BEACH GARDENS FL 33418
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/07/1971

4. FEI Number

59-1359386

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

☐

Yes ☐ No

2. Principal Place of Business

21 1211 Manor Drive

Suite, Apt. #, etc.

22

City & State

23 Singer Island FL 33404

Zip

24 33404

Country

25 Palm Beach

2a. Mailing Address

26 1211 Manor Drive

Suite, Apt. #, etc.

27

City & State

28 Singer Island FL

Zip

29 33404

Country

30 Palm Beach

9. Name and Address of Current Registered Agent

HAWKINS, T JACK
1000 POWELL DRIVE
RIVIERA BEACH FL 33404

10. Name and Address of New Registered Agent

81 Name

Hawkins, T Jack

82 Street Address (P.O. Box Number is Not Acceptable)

3400 NOcean Ave

83 APT 406

84 City Singer Island

FL

85 Zip Code

33404

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 reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE V ☐ DELETE

NAME HAWKINS, T JACK

STREET ADDRESS 767 WINDERMERE WAY

CITY-ST-ZIP PALM BEACH GARDENS FL 33418

TITLE PST ☐ DELETE

NAME EDGAR, CARRIE H

STREET ADDRESS 767 WINDERMERE WAY

CITY-ST-ZIP PALM BEACH GARDENS FL 33418

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE V ☐ Change ☐ Addition

1.2 NAME HAWKINS, T JACK

1.3 STREET ADDRESS 3400 NOcean Ave APT 406

1.4 CITY-ST-ZIP Singer Island FL 33404

2.1 TITLE PST ☐ Change ☐ Addition

2.2 NAME Edgar, Carrie

2.3 STREET ADDRESS 1211 Manor Drive

2.4 CITY-ST-ZIP Singer Island FL 33418

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. 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 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

CARRIE H EDGAR

11/5/99

561-863-0808

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)