

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 617783

FILED  
Apr 25, 2004  
Secretary of State

Entity Name: HAWKINS INDUSTRIES, INC.

**Current Principal Place of Business:**

109-10TH AVENUE  
INDIAN ROCKS BCH, FL 33785 US

**New Principal Place of Business:**

**Current Mailing Address:**

109-10TH AVENUE  
INDIAN ROCKS BCH, FL 34635

**New Mailing Address:**

109-10TH AVENUE  
INDIAN ROCKS BCH, FL 33785 US

FEI Number: 59-6499398

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MCDONALD, ROBERT L JR  
9425 BLIND PASS ROAD  
TAMPA, FL US

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

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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: HAWKINS, CARL G I,  
Address: 109 10TH AVE  
City-St-Zip: INDIAN RKCS BEACH FL,

Title: ST ( ) Delete  
Name: HAWKINS, CAROL J,  
Address: 109 10TH AVE  
City-St-Zip: INDIAN RCKS BEACH FL,

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: HAWKINS, CARL G I,  
Address: 109 10TH AVE  
City-St-Zip: INDIAN RKCS BEACH, FL 33785 US

Title: ST (X) Change ( ) Addition  
Name: HAWKINS, CAROL J,  
Address: 109 10TH AVE  
City-St-Zip: INDIAN RCKS BEACH, FL 33785 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: HAWKINS CARL G I

PD

04/25/2004

Electronic Signature of Signing Officer or Director

Date