


2005 LIMITED PARTNERSHIP ANNUAL REPORT

Due By September 7, 2005

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

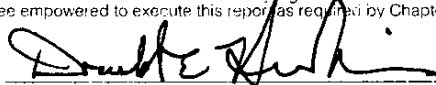
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DOCUMENT # B04000000303 1. Entity Name HAWKINS ENTERPRISES OF DELAWARE, L.P.					
Principal Place of Business 501 SOUTH RIDGEWOOD AVENUE DAYTONA, FL 32114			Mailing Address 501 SOUTH RIDGEWOOD AVENUE DAYTONA, FL 32114		
2. Principal Place of Business Suite, Apt. #, etc. City & State Zip Country		3. Mailing Address Suite, Apt. #, etc. City & State Zip Country		07012005 Chg-LP CR2E003 (10/03) 4. FEI Number <div style="font-size: 1.2em; font-weight: bold;">61-1469476</div> <div style="border: 1px solid black; padding: 2px; display: inline-block;">Applied For</div> <div style="border: 1px solid black; padding: 2px; display: inline-block;">Not Applicable</div>	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				6. Name and Address of Current Registered Agent HAWKINS, DONALD E 501 SOUTH RIDGEWOOD AVENUE DAYTONA, FL 32114	
7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="border: 1px solid black; padding: 2px; display: inline-block; font-weight: bold;">FL</div> Zip Code				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 _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>	
9. Capital Contributions as Shown on record \$15,000.00		10. Amount of Capital Contributions in FLORIDA to date.		In accordance with s. 607.193(2)(b), F.S., the limited partnership did not receive the prior notice.	
A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.					
12. GENERAL PARTNER INFORMATION			13. ADDRESS CHANGES ONLY		
DOCUMENT #	NAME		STREET ADDRESS		
STREET ADDRESS	HAWKINS, DONALD E TRUSTEE		CITY-ST-ZIP		
CITY-ST-ZIP	501 SOUTH RIDGEWOOD AVENUE DAYTONA, FL 32114				
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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 report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes.

SIGNATURE: 

6/30/05

386 252 4499

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date Daytime Phone #