

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000003610

**FILED**  
**Mar 10, 2004**  
**Secretary of State**

**Entity Name:** HAWTHORNE AIRPORT SERVICES, INC.

**Current Principal Place of Business:**

1200 SW 60TH AVENUE  
OCALA, FL 34474

**New Principal Place of Business:**

**Current Mailing Address:**

1200 SW 60TH AVENUE  
OCALA, FL 34474

**New Mailing Address:**

P.O. BOX 525  
WINSTON-SALEM, NC 27102

**FEI Number:** 57-0789093

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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: HARTON, T. DEAN  
Address: 3821 N. LIBERTY STREET  
City-St-Zip: WINSTON-SALEM, NC 27105

Title: DST ( ) Delete  
Name: URBANIA, M. MARK  
Address: 3821 N. LIBERTY STREET  
City-St-Zip: WINSTON-SALEM, NC 27105

Title: SVP ( ) Delete  
Name: GROOM, RANDALL T  
Address: 3821 N LIBERTY ST  
City-St-Zip: WINSTON-SALEM, NC 27105 US

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

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: DST (X) Change ( ) Addition  
Name: LEVESQUE, STEVEN P  
Address: 3821 N. LIBERTY STREET  
City-St-Zip: WINSTON-SALEM, NC 27105

Title: SVP (X) Change ( ) Addition  
Name: BECKER, MARGUERITE  
Address: 3821 N LIBERTY ST  
City-St-Zip: WINSTON-SALEM, NC 27105 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: STEVEN P. LEVESQUE

DST

03/10/2004

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date