

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000005906

Entity Name: HAWKSOFT, INC.

FILED
Feb 05, 2009
Secretary of State

Current Principal Place of Business:

22781 AIRPORT ROAD N.E.
AURORA, OR 97002

New Principal Place of Business:

Current Mailing Address:

22781 AIRPORT ROAD N.E.
AURORA, OR 97002

New Mailing Address:

FEI Number: 91-1774691

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PHILLIPS, GLEN D
61 GREENFIELD COURT
WINTER HAVEN, FL 33884 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: P () Delete
Name: HAWKINS, PAUL CEO
Address: 1105 S PINE STREET
City-St-Zip: CANBY, OR 97013

Title: VP () Delete
Name: HANSEN, JASON
Address: 395 S PEPPERWOOD DRIVE
City-St-Zip: CANBY, OR 97013

Title: ST () Delete
Name: OLSON, DAVID
Address: 10931 MARTIN LANE NE
City-St-Zip: AURORA, OR 97002

Title: VP () Delete
Name: HAWKINS, SEAN
Address: 20050 S HOMESTEAD DRIVE
City-St-Zip: OREGON CITY, OR 97045

Title: VP () Delete
Name: PHILLIPS, JAMES
Address: 35466 S FIRWOOD LANE
City-St-Zip: MOLLALLA, OR 97038

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: DAVID OLSON

ST

02/05/2009

Electronic Signature of Signing Officer or Director

Date