

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G07388

FILED  
Mar 15, 2011  
Secretary of State

Entity Name: HAWTHORNE GROUP, INC.

**Current Principal Place of Business:**

501 E. KENNEDY BLVD.  
STE. 1700  
TAMPA, FL 33602 US

**New Principal Place of Business:**

501 E. KENNEDY BLVD.  
SUITE 1700  
TAMPA, FL 33602 US

**Current Mailing Address:**

501 E. KENNEDY BLVD.  
STE. 1700  
TAMPA, FL 33602 US

**New Mailing Address:**

501 E. KENNEDY BLVD.  
SUITE 1700  
TAMPA, FL 33602 US

FEI Number: 59-2233935

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

JACOBSON, RICHARD A  
501 E. KENNEDY BLVD., STE. 1700  
TAMPA, FL 33602 US

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

JACOBSON, RICHARD A  
501 E. KENNEDY BLVD., SUITE 1700  
TAMPA, FL 33602 US

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

03/15/2011

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: DPTS  
Name: DEARIE, HUGH  
Address: BOX 459 STATION K  
City-St-Zip: TORONTO, ON

Title: AS  
Name: JACOBSON, RICHARD A  
Address: 501 E KENNEDY BLVD STE 1700  
City-St-Zip: TAMPA, FL 33602 US

I hereby 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 all other like empowered.

SIGNATURE: HUGH DEARIE

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

DPTS

03/15/2011

\_\_\_\_\_  
Date