## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

DOCUMENT #

STREET ADDRESS

CITY-ST-ZIP

G35924

(1)

HAWK'S CAY MANAGEMENT, INC.

FILED										
Feb 24 1998 8:00am										
Secretary of State										

								-			. B/201 2084 (201
Principal Place of Business Mailing Address										4.4., 1.11., 4.2.,	
150 E. SAMPLE RD. 150 E. SAMPLE RD.											
SUITE 200 POMPANO BEACH FL 33064				SUITE 200 POMPANO BEACH FL 33064				DO NOT WRITE IN THIS SPACE			
POMPAN	) DEAUN FL 3.	X/04		POMPANO DENON PL	33004			3. Date Incorporated or Qualifie	d		
								04/26/1983			
2. Principal	Place of Busin	ness	2a.	Mailing Address				4, FEI Number		F	Applied For
21			26					59-2293980		N	Vot Applicable
Suite, Ap	t. #, <b>et</b> c.			Suite, Apt. #, etc.				5. Certificate of Status Desired	X	<b>7</b>	Additional
22	<u> </u>		27								Required
City & Ste	ate		<u> </u>	City & State				6. Election Campaign Financing			May Be
23			28	·	1 0-			Trust Fund Contribution			d to Fees
Zip		Country	29	Zip	Cou	ntry		This corporation owes or has  Personal Property Tay due to			ntangible No
24	tered Agent	30			Personal Property Tax due Ju 10. Name and Address of New						
	<u> </u>		air negis	tered Agent		81	Name	10. 110110 0110 1101			
	JOHNSON,					_					<del></del>
		PLE ROAD, STE 200	,			82	Street Addre	ess (P.O. Box Number is Not Accep	rtable)		
1	% HAWK'S				1	83				<del></del>	
	PUMPANU I	BEACH FL 33064				_					
						84	City		F	L 85 Zip	o Code
11. Pursuan	nt to the provis	ions of Sections 607 05	02 and 6	07.1508, Florida Statu	tes, the at	ove	s-named corpo	oration submits this statement for the	e purpose	of changing	its registered
office or	r registered ag	ent, or both, in the Stateth, and accept the obli	te of Flori	da. Such change was f. Section 607 0505. Fi	authorized	l by	the corporation	on's board of directors. I hereby ac	cept the ar	opointment a	is registered
I -		in, and accept the obii	ganona o	1, 0000, 100 100,000,11	iorida otac	atoo					
SIGNATURE	Signature, typed	or printed name of registered a	gent and tille	il applicable. (NO	TE: Registered	Age	nt signature require	d when reinstating)	DATE		
12.	<u>-</u>	OFFICERS A	ND DIREC		13.			ADDITIONS/CHANGES TO OF	FICERS A		
TITLE	P			DELETE	1.1 TIT	LE				☐ Change	Addition
NAME		son, Donald H.			1.2 NA	ME					
STREET ADDRESS 150 E SAMPLE RD #200				1.3 STREET ADDI			ADDRESS				
CITY-ST-ZIP	POMP	<u> ANO BCH, FL 00001</u>	0		1.4 (0)		T-ZIP			[ ] Observe	Adam
TITLE				☐ DELETE	2.1 TIT					Change	Addition
NAME					2.2 NA						
STREET ADDRESS	3						ADDRESS				
CiTY-ST-ZIP	<del> </del>			DELETE	2. 4 CI		ST-ZIP	<u> </u>		Change	☐ Addition
TITLE					3.1 TIT					☐ Origingo	Nation
NAME	.				3.2 NA		ADDRESS				
STREET ADDRESS	5						1				
CITY-ST-ZIP TITLE	<del> </del>			DELETE	3.4. CI 4.1 TIT		11-ZIP	.,		Change	Addition
NAME					4.2 N						_
							ADDRESS				
STREET ADDRESS	<b>`</b>				4.4 CI						
CITY-ST-ZIP TITLE	+-			DELETE	5.1 TIT		> ER			☐ Change	Addition
NAME					5.2 NA					Ţ	
STREET ADDRESS							ADDRESS				
CITY-ST-ZIP					5.4 CI						
TITLE	<del> </del>			☐ DELETE	6.1 TIT					Change	Addition
1	1 .			•			[				

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

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 annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.