

**2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000120920

**FILED  
Jan 06, 2011  
Secretary of State**

**Entity Name:** HAWKINS INSURANCE & INVESTMENTS LLC

**Current Principal Place of Business:**

1066 US HWY 331 S  
DEFUNIAK SPRINGS, FL 32435

**New Principal Place of Business:**

**Current Mailing Address:**

1066 US HWY 331 S  
DEFUNIAK SPRINGS, FL 32435

**New Mailing Address:**

**FEI Number:** 26-1511849      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

HAWKINS, BRIAN  
1066 US HWY 331 S  
DEFUNIAK SPRINGS, FL 32435      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

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGR  
**Name:** HAWKINS, BRIAN  
**Address:** 1066 US HWY 331 S  
**City-St-Zip:** DEFUNIAK SPRINGS, FL 32435

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: BRIAN HAWKINS      MGR      01/06/2011

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date