

# 2001 UNIFORM BUSINESS REPORT (UBR)

06-05-2001 90686 001 \*\*\*\*\*8.75  
 06-05-2001 90686 002 \*\*\*\*\*61.25  
 N00000004590

**FILED**

01 JUN 26 PM 12:36

SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

**DOCUMENT # N00000004590**

1. Entity Name

**HAWKINS HOMES, INC.**

Principal Place of Business

Mailing Address

137 N.W. 15TH STREET  
 POMPANO BEACH FL 33060-5434

137 N.W. 15TH STREET  
 POMPANO BEACH FL 33060-5434

2. Principal Place of Business

3. Mailing Address

927 NW 6th st.

Suite, Apt. #, etc.

POMPANO B. FLA

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-1045273

Applied For

Not Applicable

Zip  
 33060

Country  
 U.S.A.

Zip  
 33060

Country  
 USA

5. Certificate of Status Desired

\$8.75 Additional  
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ELLINGTON, CHARLES SR.  
 137 N.W. 15TH STREET  
 POMPANO BEACH FL 33060-5434

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOT) Registered Agent signature required when reinstating

DATE

**FILE NOW:  
 FEE IS \$61.25**

9. Election Campaign Financing  
 Trust Fund Contribution

**\$5.00 May Be  
 Added to Fees**

**Make Check Payable to  
 Department of State**

10. OFFICERS AND DIRECTORS

T MOORE, DAWN M  Delete  
 8550 N.W. 49 ST.  
 LANDERHILL FL 33351

T ELLINGTON, CHARLES M  Delete  
 137 N.W. 15TH ST.  
 POMPANO BEACH FL 33060

T ELLINGTON, JULIA D  Delete  
 8550 N.W. 49 ST.  
 LAUDERHILL FL 33351

Delete

Delete

Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

C = CHAIRMAN  Change  Addition  
 NAME: CHARLES ELLINGTON SR.  
 STREET ADDRESS: 137 N.W. 15TH ST.  
 CITY-ST-ZIP: POMPANO BEACH FL 33060-5434

Change  Addition

T ELLINGTON, Julius  Change  Addition  
 8550 N.W. 49 ST.  
 LAUDERHILL FL 33351

Change  Addition

Change  Addition

Change  Addition

12. 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 report or supplemental 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/31/01

Date

954-7818537

Daytime Phone #

CR2E037 (10/00)