

**2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # N01000006160

1. Entity Name
HAWK ISLAND HOMEOWNERS' ASSOCIATION, INC.



FILED
Jan 31, 2006 08:00 AM
Secretary of State

Principal Place of Business
**3890 EAST STATE RD 64
SUITE 101
BRADENTON, FL 34208**

Mailing Address
**4301 32ND ST. W.
SUITE A-19
BRADENTON, FL 34205**



01102006 No Chg-NP CR2E037 (11/05)

4. FEI Number
71-0907928 Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**HAMLIN, CURTIS D
1205 MANATEE AVENUE WEST
BRADENTON, FL 34205**

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD KEATING, KENNETH D 3890 EAST STATE RD 64 BRADENTON, FL 34208
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD WORTHINGTON, NORMAN A 4074 ROBERTS POINT ROAD SARASOTA, FL 34242
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD KEATING, BRENDA J 3890 EAST STATE RD 64 BRADENTON, FL 34208
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD KEATING, BRENDA J 3890 EAST STATE RD 64 BRADENTON, FL 34208
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

000000412623
02/10/06-80053-021 61.25

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 use empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #