2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Apr 26, 2007 8:00 am Secretary of State

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DOCUMENT # N02000007141 1. Entity Name HAWKS POINTE OWNERS ASSOCIATION, INC.								04-26-200	07 90188 0	45 ****(51.25		
920 THIRD STREET 92 Suite B Su				ling Address O THIRD STREET ITE B PTUNE BEACH, FL 32266				40085430					
2. Principal Place of Business - No P.O. Box # 3. Ma				iling Address									
Suite, Apt. #, etc. Sc				uite, Apt. #, etc.				04052007 C	hg-NP	CR2E037	(12/06)		
City & State				City & State				4. FEI Number Applied For 13-4219408 Not Applicable					
Zip	Country Zip				Country			5. Certificate of S	tatus Desired		8.75 Add se Required		
6. Name and Address of Current Registered Ageπt								7. Name and Address of New Registered Agent					
WALLACE, L. DENISE 920 THIRD STREET SUITE B NEPTUNE BEACH, FL 32266						Street Address (P.O. Box Number is Not Acceptable)							
						City FL Zip Code						1	
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													
					Election Campaign Financing Trust Fund Contribution.			\$5.00 May Be Added to Fees	Make check payable to Florida Department of State				
10. OFFICERS AND DIRECTORS				11.				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10				10	
TITLE	PD	_		Delete	TITLE		PD				☐ Change	Addition	
NAME		S, MARK A		• •	NAME		Eva	ans, Marv	7				
STREET ADDRESS CITY-ST-ZIP		OWN POINT ROAD, SU NVILLE, FL 32257	JITE A			ET ADDRESS ST-ZIP		ans, Mary 17 Hawks cksonvill					
TITLE	VD			Delete	TITLE						Change	Addition	
NAME), BEVERLY J		^	NAME	:	TD Jor	nes. Mago	rie				
STREET ADDRESS 3840 CROWN POINT ROAD, SUITE A CITY-ST-ZIP JACKSONVILLE, FL 32257			JITE A		et address St-Zip	93	es, Maggie 19 Hawks Point Drive Eksonville, FL 32222						
TITLE	STD	17,222,12 32231		Delete	TITLE		Jac	CKSONVIII	le, fb		☐ Change	Addition	

NAME HART, CURTIS L Wilson, Shelia J. 3840 CROWN POINT RD, STE A STREET ADDRESS STREET ADDRESS 9016 Redtail Drive Jacksonville, FL 32222 JACKSONVILLE, FL 32257 CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

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 ceth; 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:

RE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

sulo-cyck(40P)

Addition