

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N04000011002

**FILED**  
**Apr 22, 2011**  
**Secretary of State**

**Entity Name:** DWAYNE HAWKINS FAMILY FOUNDATION, INC.

**Current Principal Place of Business:**

6001 34TH STREET NORTH  
ST PETERSBURG, FL 33714

**New Principal Place of Business:**

**Current Mailing Address:**

6001 34TH STREET NORTH  
ST PETERSBURG, FL 33714

**New Mailing Address:**

**FEI Number:** 20-2788633

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

HAWKINS, DWAYNE  
6001 34TH STREET NORTH  
ST PETERSBURG, FL 33714 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

**OFFICERS AND DIRECTORS:**

**Title:** D  
**Name:** HAWKINS, DWAYNE  
**Address:** 6001 34TH STREET NORTH  
**City-St-Zip:** ST PETERSBURG, FL 33714

**Title:** D  
**Name:** PHEIL-HAWKINS, JOANNE  
**Address:** 6001 34TH STREET NORTH  
**City-St-Zip:** ST PETERSBURG, FL 33714

**Title:** D  
**Name:** HAWKINS, KEVIN E  
**Address:** 2911 SUNSET WAY  
**City-St-Zip:** ST PETE BEACH, FL 33706

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

**SIGNATURE:** DWAYNE HAWKINS

D

04/22/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date