2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2007
Secretary of State

DOCUMENT# N98000001508

Entity Name: HAWKINS COVE OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

SIGNATURE REALTY
4003 HARTLEY RD
JACKSONVILLE, FL 32257

New Principal Place of Business:

Current Mailing Address:

SIGNATURE REALTY
4003 HARTLEY RD
JACKSONVILLE, FL 32257

New Mailing Address:

FEI Number: 59-3564881 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CANTRELL, BRYAN
%SIGNATURE REALTY
4003 HARTLEY RD
JACKSONVILLE, FL 32257 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: TD ( ) Delete
Name: HOLCOMB, FLORENCE
Address: 1679 HAWKINS COVE DR. E.
City-St-Zip: JACKSONVILLE, FL 32246

Title: VPD ( ) Delete
Name: NOWAK, JAMES
Address: 12019 BLUE STAR COURT
City-St-Zip: JACKSONVILLE, FL 32246

Title: D (X) Delete
Name: THOMSON, RENE
Address: 12137 AUTUMN SUNRISE DR.
City-St-Zip: JACKSONVILLE, FL 32246

Title: SD ( ) Delete
Name: NOGLE, LINDA
Address: 1851 WOODRIVER DRIVE
City-St-Zip: JACKSONVILLE, FL 32246

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TD (X) Change ( ) Addition
Name: HOLCOMB, FLORENCE
Address: 1679 HAWKINS COVE DR. E.
City-St-Zip: JACKSONVILLE, FL 32246 US

Title: DP (X) Change ( ) Addition
Name: WOTANIS, LUELLYN
Address: 12035 AUTUMN SUNRISE DRIVE
City-St-Zip: JACKSONVILLE, FL 32246 US

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: LUELLYN WOTANIS DP 04/28/2007

Electronic Signature of Signing Officer or Director — Date