## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N98000001508

FILED Apr 24, 2008 Secretary of State

Entity Name: HAWKINS COVE OWNERS ASSOCIATION, INC.

Current Principal Place of Business:			New Prince	New Principal Place of Business:		
12620-3 BI 301	EACH BLVD.					
	VILLE, FL 32	246				
Current Mailing Address:			New Maili	ng Address:		
301	EACH BLVD. VILLE, FL 32	246				
	: <b>59-3564881</b>	FEI Number Applied For ( )	FEI Number Not App	licable ( ) Certificate of Status Desired ( )		
		Current Registered Agent:		Address of New Registered Agent:		
12620-3 BI 301 JACKSON The above	WSKI, SHER EACH BLVD. VILLE, FL 32 named entity of Florida.	246 US	urpose of changing	its registered office or registered agent, or both		
SIGNATUF						
3,0,1,		nic Signature of Registered Age	nt	Date		
OFFICERS AND DIRECTORS:			ADDITION	IS/CHANGES TO OFFICERS AND DIRECTO		
Title: Name: Address: City-St-Zip: City-St-Zip: City-St-Zip:	HOLCOMB, FI 1679 HAWKIN JACKSONVILI  DP ( WOTANIS, LU 12035 AUTUM JACKSONVILI  SD ( NOGLE, LIND 1851 WOODR JACKSONVILI	IS COVE DR. E. LE, FL 32246 US  ) Delete ELLYN IN SUNRISE DRIVE LE, FL 32246 US  ) Delete A RIVER DRIVE	Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Oldress: City-St-Zip: Title: Name: Address: City-St-Zip:	T (X) Change () Addition HOLCOMB, FLORENCE 12620-3 BEACH BLVD. #301 JACKSONVILLE, FL 32246 US  P (X) Change () Addition WOTANIS, LUELLYN 12620-3 BEACH BLVD. #301 JACKSONVILLE, FL 32246 US  S (X) Change () Addition NOGLE, LINDA 12620-3 BEACH BLVD. #301 JACKSONVILLE, FL 32246  D () Change (X) Addition MURASSO, NANCY 12620-3 BEACH BLVD. #301 JACKSONVILLE, FL 32246		
Fitle: Name: Address: City-St-Zip:	(	) Delete	Title: Name: Address: City-St-Zip:	VP ( ) Change (X) Addition NELMS, JILL 12620-3 BEACH BLVD. #301 JACKSONVILLE, FL 32246		

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: SHERRIE JARNUTOWSKI RA 04/24/2008