

FILED
Jul 30, 2003 8:00 am
Secretary of State

07-07-2003 90306 047 ***150.00

FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01000084500

1. Entity Name

Grayhawk Communities
Corporation



DO NOT WRITE IN THIS SPACE

55052756

2. Principal Place of Business

9202 Olmstead Dr.

3. Mailing Address

9202 Olmstead Dr.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
Lake Worth, FL

City & State
Lake Worth, FL

4. FEI Number

05-1131487

Applied For

No. Applicable

Zip Country
33467 USA

Zip Country
33467 USA

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name
Lawrence B. Hawkins

Street Address (P.O. Box Number is Not Acceptable)

9202 Olmstead Drive

City Lake Worth FL Zip Code 33467

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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 the # applicable.

NOTE: Registered Agent Signature required when resigning.

DATE

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution.

☐ \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE VP
NAME Lawrence B. Hawkins
STREET ADDRESS 9202 Olmstead Drive
CITY-STATE-ZIP Lake Worth, FL 33467

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE P
NAME Larry K. Hawkins
STREET ADDRESS 1021 NW 60th Street
CITY-STATE-ZIP Gainesville, FL 32605

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(a), 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 607, Florida Statutes; and that my name appears in Block 10 or on an attachment with an address, with all office-like empowerment.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/23/03 561-968-3238

CR200348 (12/02)

Attachment #
55052754
PO1666684560

GrayHawk Communities Corporation
9202 Olmstead Drive
Lake Worth, FL 33467
561-968-3238 Phone
561-968-3687 Fax

GrayHawk Communities Corporation

May 23, 2003

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

RE: GrayHawk Communities Corporation EIN Number 65-1131487

To Whom It May Concern:

Per a conversation with one of your representatives, we are notifying you that we did not receive our 2003 Uniform Business Reports to file prior to the May 1st deadline. We are also requesting that any additional fees be waived.

We were also instructed to obtain the forms online and to complete them and attach with this letter.

Please contact either Stacy Roherty or myself at 561-968-3238 if you should have any questions.

Respectfully,

Tina M. Hawkins

Cc. File