

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Jan 16, 2008 08:00 AM
Secretary of State**

DOCUMENT # P02000047114

**1. Entity Name
HAWKINS ROOFING, INC.**



Principal Place of Business

**131 TESSA TERRACE
PALATKA, FL 32177**

Mailing Address

**PO BOX 398
SAN MATEO, FL 32187**



01072008

No Chg-P

CR2E034 (11/05)

4. FEI Number

47-0867427

Applied For

Not Applied

5. Certificate of Status Desired



**\$8.75 Additional
Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**HAWKINS, JEREMY D
131 TESSA TERRACE
PALATKA, FL 32177**

**DO NOT WRITE
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 title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

**9. Election Campaign Financing
Trust Fund Contribution.**



**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

**TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP**
**D
HAWKINS, JEREMY D
131 TESS TERRACE
PALATKA, FL 32177**

**TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP**

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01/17/08-80046-022 158.75**

**DO NOT WRITE
IN THIS SPACE**

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 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 Block 11; changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/11/08 386-324-9486