# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000146718

Entity Name: J. BRET HAWKINS, INC.

FILED Apr 30, 2009 Secretary of State

Current Principal Place of Business: New P	rincipal Place of Business:
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3930 S NOVA RD 5889 S WILLIAMSON BLVD

STE 301 SUITE 1401

PORT ORANGE, FL 32127 PORT ORANGE, FL 32128

Current Mailing Address: New Mailing Address:

3930 S NOVA RD 5889 S WILLIAMSON BLVD STE 301 SUITE 1401

PORT ORANGE, FL 32127 PORT ORANGE, FL 32128

1 31/1 31/1 32/23

FEI Number: 20-3727637 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

### Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

HAWKINS, BRET HAWKINS, BRET

3930 S NOVA RD 5889 S WILLIAMSON BLVD

STE 301 STE 1401

PORT ORANGE, FL 32127 US PORT ORANGE, FL 32128 US

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: 04/30/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

### **OFFICERS AND DIRECTORS:**

### ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVST ( ) Delete Title: PVST (X) Change ( ) Addition

Name: HAWKINS, BRET Name: HAWKINS, BRET

 Address:
 3930 S NOVA RD STE 301
 Address:
 5889 S WILLIAMSON BLVD #1401

 City-St-Zip:
 PORT ORANGE, FL 32127
 City-St-Zip:
 PORT ORANGE, FL 32128

Title: D ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 HAWKINS, BRET
 Name:

 Address:
 3930 S NOVA RD STE 301
 Address:

 City-St-Zip:
 PORT ORANGE, FL 32127
 City-St-Zip:

Name: HAWKINS, JENNIE Name: HAWKINS, JENNIE

Address: 3930 S NOVA RD STE 301 Address: 5889 S WILLIAMSON BLVD #1401
City-St-Zip: PORT ORANGE, FL 32127 City-St-Zip: PORT ORANGE, FL 32128

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JENNIE M HAWKINS D 04/30/2009