

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000146718

Entity Name: J. BRET HAWKINS, INC.

**FILED**  
**Aug 31, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

5889 S WILLIAMSON BLVD  
SUITE 1401  
PORT ORANGE, FL 32128

**New Principal Place of Business:**

**Current Mailing Address:**

5889 S WILLIAMSON BLVD  
SUITE 1401  
PORT ORANGE, FL 32128

**New Mailing Address:**

FEI Number: 20-3727637

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

HAWKINS, BRET  
5889 S WILLIAMSON BLVD  
STE 1401  
PORT ORANGE, FL 32128 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: PVST  
Name: HAWKINS, BRET  
Address: 5889 S WILLIAMSON BLVD #1401  
City-St-Zip: PORT ORANGE, FL 32128

Title: D  
Name: HAWKINS, BRET  
Address: 3930 S NOVA RD STE 301  
City-St-Zip: PORT ORANGE, FL 32127

Title: D  
Name: HAWKINS, JENNIE  
Address: 5889 S WILLIAMSON BLVD #1401  
City-St-Zip: PORT ORANGE, FL 32128

I hereby 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 all other like empowered.

SIGNATURE: JENNIE HAWKINS

D

08/31/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date