## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P06000150150

Entity Name: HAWKSBILL FARM, INC.

FILED Jan 25, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

19462 CYPRESS STAR TRAIL ODESSA, FL 33556

Current Mailing Address: New Mailing Address:

1418 COBURN DRIVE 3937 HEADSAIL DR

TARPON SPRINGS, FL 34689 NEW PORT RICHEY, FL 34652

FEI Number: 20-5982706 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:

FRISCH, RONDI J ANDERSON, BRITTA L 1418 COBURN DRIVE 3937 HEADSAIL DR

TARPON SPRINGS, FL 34689 US NEW PORT RICHEY, FL 34652 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: BRITTA L ANDERSON 01/25/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Name: ANDERSON, BRITTA L
Address: 12120 STORCH LN
Address: 3937 HEADSAIL DR

City-St-Zip: SAN ANTONIO, FL 33576 City-St-Zip: NEW PORT RICHEY, FL 34652

Title: VP ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 ANDERSON, MARC B
 Name:

 Address:
 17688 EVENER WAY
 Address:

 City-St-Zip:
 EDEN PRAIRIE, MN 55346
 City-St-Zip:

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

 Name:
 Name:
 MEIXNER, TANIA

 Address:
 Address:
 27965 WOODSIDE DR

 City-St-Zip:
 City-St-Zip:
 EXCELSIOR, MN 55331

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

 Name:
 Name:
 ANDERSON, KAREN

 Address:
 Address:
 6013 CO RD 6

 City-St-Zip:
 City-St-Zip:
 MAPLE PLAIN, MN 55359

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: BRITTA L ANDERSON PRES 01/25/2008