2003 FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

P93000063138 DOCUMENT



04-07-2003 90954 029 ***150.00 1.5 Entity Name HAWK SERVICES LTD., INC. Principal Place of Business Mailing Address 1200 MARIGOLD DRIVE 1200 MARIGOLD DRIVE BAREFOOT BAY FL 32976 BAREFOOT BAY FL 32976 US US 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES 4. FEI Number 65-0439947 Applied For City & State City & State Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent ANDERSON, GUNNAR B Street Address (P.O. Box Number is Not Acceptable) 1200 MARIGOLD DRIVE **BAREFOOT BAY FL 32976** Zip Code City 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 9. Election Campaign Financing \$5.00 May Be After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State P/T/D OFFICERS AND DIRECTORS 10. 11. Change TIT! F Delete TITLE Gunnar B. Anderson anderson, Gunnar B NAME NAME 1200 Marigold Drive 1200 MARIGOLD DRIVE STREET ADDRESS STREET ADDRESS Barefoot Bay, FL BAREFOOT BAY FL 32976 CITY-ST-ZIP CITY-ST-7IP Change X Addition X Delete TITLE DALY, JOHN F Dorothy P. Ash NAME 13489 WOODRIDGE LANE ` STREET ADDRESS STREET ADDRESS 1200 Marigold Drive Palm Harbor Fl 34684 CITY-ST-ZIP Barefoot Bay, FL 32976 ☐ Addition TITLE Delete -TITLE : ☐ Change NAME NAME STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY-ST-7IP ☐ Delete TITI F Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP

FILED Apr 07, 2003 8:00 am Secretary of State

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 eport as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an GUNNAR B. ANDER

STREET ADDRESS

CITY-ST-7IP

TITLE NAME

TITLE

NAME

STREET ADDRESS CITY-ST-ZIP

☐ Delete

Change

Addition