


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 08, 2004 08:00 AM
Secretary of State

DOCUMENT # P94000010655 1. Entity Name LITTLE HAW CREEK, INC.	
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Principal Place of Business 5505 KELLER AVE DELEON SPRINGS, FL 32130 US	Mailing Address 5505 KELLER AVE DELEON SPRINGS, FL 32130 US
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DO NOT WRITE IN THIS SPACE



01052004 No Chg-P CR2E034 (10/03)

4. FEI Number 59-2343213	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent BLACKWELDER, STANLEY JR. 5616 OLD PERKINS HWY. DELEON SPRINGS, FL 32130
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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP BLACKWELDER, STANLEY JR. 5616 OLD PERKINS HWY. DELEON SPRINGS, FL 32130
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MORGAN, STEVEN T. 1998 CORNELL ROAD MIDDLEBURG, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DST MORGAN, WILLIAM R. JR 5505 KELLER AVE DELEON SPRINGS, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D EVANS, BRIAN 5595 OLD PERKINS HWY DELEON SPRINGS, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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01/08/04-80009-005 150.00

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IN THIS SPACE**

12. 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 report 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 address, with all other like empowered.

SIGNATURE: *William R Morgan Jr* **WILLIAM R MORGAN JR** 1-5-2004 3869851562
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #