


# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jul 05, 2005 8:00 am**  
**Secretary of State**


07-05-2005 90117 037 \*\*\*150.00

DOCUMENT # P99000085241		
1. Entity Name <b>THE HAWTHORNE LAW FIRM, P.A.</b>		

Principal Place of Business <b>319 EAST MAIN STREET TAVARES, FL 32778</b>	Mailing Address <b>PO BOX 124 MT DORA, FL 32756</b>
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**50054664**

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

	
05202005 Chg-P	CR2E034 (10/03)
4. FEI Number <b>59-3600188</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	

6. Name and Address of Current Registered Agent	
<b>HAWTHORNE, CANDACE A 319 EAST MAIN STREET TAVARES, FL 32778</b>	

7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	FL Zip Code

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 *Candace A. Hawthorne* (Name) DATE 6/25/05

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

<b>\$150.00</b> <del>FILE NOW! FEE IS \$350.00</del> <del>Due by September 7, 2005</del>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P HAWTHORNE, CANDICE A 319 E. MAIN ST. TAUARES, FL 32278</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: *Candace A. Hawthorne* SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date \_\_\_\_\_ Daytime Phone # \_\_\_\_\_

ATTACHMENT

50054664  
HAWTHORNE LAW FIRM, P.A.

CANDACE A. HAWTHORNE, ESQ.

*Board Certified Criminal Trial Attorney*

319 East Main Street  
Tavares, Florida 32778

Phone: (352) 742-5200; Fax: (352) 742-5151; E-Mail: [ALawyerCH@aol.com](mailto:ALawyerCH@aol.com)

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Friday, June 24, 2005

Florida Department of State  
Division of Corporations  
ATTN: Jessica C. Justice  
P.O. Box 1500  
Tallahassee, Florida 32302-1500

RE: THE HAWTHORNE LAW FIRM, P.A.; Ref. Number P99000085241

Dear Madam:

We have received your correspondence dated May 26, 2005. Pursuant to the letter, we have corrected the application to include the annual report/reinstatement application form completed in its entirety. Enclosed is the completed form and check for fees.

Further to our telephone conversation today with Gary at (850) 245-6059, he asked that we include this letter to bring to your attention a possible misprint on the application form. Our original reinstatement was mailed on April 29, 2005, before the cut off for the late fee penalty assessment. We noticed that the form states the filing fee is to be \$550.00, however according to your letter, we will avoid the \$400.00 late fee by sending the corrected report to you. We have complied with the letter and accordingly, will submit our check for the regular filing fee of \$150.00.

Please contact our office at the above telephone number if you have any questions or concerns. Thank you for your time and attention to this matter.

Sincerely,



Candace A. Hawthorne, Esq.  
CAH/jmw