

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S45202

1. Corporation Name

HAWKINS AUTOMOTIVE INC

Principal Place of Business

1111-R ENTERPRISE CT
HOLLY HILL FL 32117
US

Mailing Address

2412 TOMOKA FARMS RD
DAYTONA BEACH FL 32124
US

FILED
Jan 28, 1999 8:00am
Secretary of State

01-28-1999 90043 018 ***150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/15/1991

4. FEI Number

59-3059577

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional

Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be

Added to Fees

8. This corporation owes the current year Intangible

Personal Property Tax.

☐

Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

9. Name and Address of Current Registered Agent

HAWKINS, LEROY R.
2412 TOMOKA FARMS RD
DAYTONA BCH FL 32124

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Leroy R. Hawkins

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

10 JAN 1999

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME PD
HAWKINS, LEROY R
STREET ADDRESS 2412 TOMOKA FARMS RD
CITY-ST-ZIP DAYTONA BEACH FL

TITLE ☐ DELETE

NAME V
HAWKINS, JOYCE
STREET ADDRESS 2412 TOMOKA FARMS RD
CITY-ST-ZIP DAYTONA BEACH FL

TITLE ☐ DELETE

NAME T
HAWKINS, ROY R
STREET ADDRESS 3980 BEXHILL DR
CITY-ST-ZIP NEW SYRNA BEAHC FL

TITLE ☐ DELETE

NAME S
HAWKINS, LINDA
STREET ADDRESS 3980 BEXHILL DR
CITY-ST-ZIP NEW SMYRNA BEACH FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10 JAN 1999

Date

Daytime Phone #

(904) 2559447

CR2E034 (11/98)