

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

FILED  
May 01 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # V38678

(1)

1. Corporation Name

HAWLEY ENTERPRISES INC.



Principal Place of Business

Mailing Address

2780 FAIRPLEX DR  
POMONA FL 91768  
US

PO BOX 484  
LA VERNE CA 91750  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/22/1992

4. FEI Number

59-3125621

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 Fairplex, Gate 12, White Ave

Suite, Apt. #, etc.

22 City & State  
Pomona, CA

23 Zip  
91768

24 Country  
US

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country  
US

30

9. Name and Address of Current Registered Agent

HAWLEY, FRANK  
GAINESVILLE RACEWAY  
COUNTY ROAD 225  
GAINESVILLE FL 32609

10. Name and Address of New Registered Agent

81 Name

Hawley, Donna L.

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

12215 SE County Rd. 234 (Box 907)

83

84 City

Micanopy

FL

85 Zip Code  
32667

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

4-20-98

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME  
HAWLEY, FRANK  
STREET ADDRESS  
8078 CRESTVIEW CT  
CITY-ST-ZIP  
ALTA LOMA CA

TITLE ☐ DELETE

NAME  
HAWLEY, LANA  
STREET ADDRESS  
8078 CRESTVIEW CT  
CITY-ST-ZIP  
ALTA LOMA CA

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

P

☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

6781 Cactus Dr.  
La Verne, CA 91750

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

☒ Change ☐ Addition

6781 Cactus Dr.  
La Verne, CA 91750

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

☐ Change ☐ Addition

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

☐ Change ☐ Addition

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change ☐ Addition

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.

SIGNATURE

Frank Hawley

4-20-98

909-627-2466

CR2E034 (10/97)