

2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000001508

Entity Name: HAWKINS COVE OWNERS ASSOCIATION, INC.**Current Principal Place of Business:**200 BUSINESS PARK CIRCLE
SUITE 101
ST AUGUSTINE, FL 32095**Current Mailing Address:**200 BUSINESS PARK CIRCLE
SUITE 101
ST AUGUSTINE, FL 32095 US**FEI Number:** 59-3564881**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**VESTA PROPERTY SERVICES
200 BUSINESS PARK CIRCLE
SUITE 101
ST AUGUSTINE , FL 32095 US*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.***SIGNATURE:** HEATHER BELADI

03/05/2025

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	SECRETARY
Name	NOWACK, JIM
Address	200 BUSINESS PARK CIRCLE SUITE 101
City-State-Zip:	ST AUGUSTINE FL 32095

Title	DIRECTOR
Name	JADAA, BASSEL
Address	200 BUSINESS PARK CIRCLE SUITE 101
City-State-Zip:	ST AUGUSTINE FL 32095

Title	VP
Name	SEVICK, MICHAEL
Address	200 BUSINESS PARK CIRCLE SUITE 101
City-State-Zip:	ST AUGUSTINE FL 32095

Title	TREASURER
Name	WAGNER, DEBI
Address	200 BUSINESS PARK CIRCLE SUITE 101
City-State-Zip:	ST AUGUSTINE FL 32095

Title	PRESIDENT
Name	PEIRSON, WILLIAM
Address	200 BUSINESS PARK CIRCLE SUITE 101
City-State-Zip:	ST AUGUSTINE FL 32095

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: PEIRSON, WILLIAM

PRESIDENT

03/05/2025

Electronic Signature of Signing Officer/Director Detail

Date