

**2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# J02403

**FILED**  
**Feb 05, 2024**  
**Secretary of State**  
**6914363954CC**

**Entity Name:** TOMMY HAWKINS & SONS, INC. PAVING CONTRACTORS

**Current Principal Place of Business:**

TOMMY HAWKINS & SONS  
909 BARREL AVE  
FT. PIERCE, FL 34982

**Current Mailing Address:**

TOMMY HAWKINS & SONS, INC  
909 BARREL AVE  
FT. PIERCE, FL 34982 US

**FEI Number:** 59-2648425

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

HURTA, TRACY  
TOMMY HAWKINS & SONS  
909 BARREL AVE  
FT. PIERCE, FL 34982 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:** TRACY HURTA

02/05/2024

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title           TREASURER  
Name           HAWKINS, ROSALIE  
Address        4665 S 25TH ST  
City-State-Zip: FT PIERCE FL

Title           VP  
Name           BUCHMEYER, STEVEN M.  
Address        20908 GLADES CUT OFF  
City-State-Zip: FT PIERCE FL

Title           PRESIDENT  
Name           BUCHMEYER, RONALD J.  
Address        20910 GLADES CUT OFF  
City-State-Zip: FT PIERCE FL

Title           SECRETARY  
Name           HURTA, TRACY HAWKINS  
Address        10500 W MIDWAY RD  
City-State-Zip: FT. PIERCE FL 34945

Title           DIRECTOR  
Name           BUCHMEYER, TOMMY  
Address        20806 GLADES CUT OFF RD  
City-State-Zip: PT ST LUCIE FL 34987

*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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** TRACY HAWKINS-HURTA

**SECRETARY**

02/05/2024

Electronic Signature of Signing Officer/Director Detail

Date