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.

PRESIDENT

SIGNATURE: WAYLON HAWKINS

Electronic Signature of Signing Officer/Director Detail

Entity Name: HAWKINS MANAGEMENT GROUP OF JACKSONVILLE, INC.

2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT

### Current Principal Place of Business:

4534 MARQUETTE AVENUE JACKSONVILLE, FL 32210

DOCUMENT# P06000095745

# **Current Mailing Address:**

4534 MARQUETTE AVE JACKSONVILLE, FL 32210 US

# FEI Number: 20-5256592

# Name and Address of Current Registered Agent:

HAWKINS, DAVID 4534 MARQUETTE AVE JACKSONVILLE, FL 32210 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:

Electronic Signature of Registered Agent

# Officer/Director Detail :

Title	DPT	Title	DVPS
Name	HAWKINS, WAYLON D	Name	HAWKINS, PATRICIA D
Address	4534 MARQUETTE AVE	Address	4534 MARQUETTE AVE
City-State-Zip:	JACKSONVILLE FL 32210	City-State-Zip:	JACKSONVILLE FL 32210

Certificate of Status Desired: No

FILED Jan 18, 2023 Secretary of State 1872230918CC

01/18/2023

Date

Date