DOCON	ENT# P00000095	745	
Entity N	ame: HAWKINS N	MANAGEMENT GROUP OF JACKSONVILI	E, INC.
2359 URB	Principal Place of AN RD. WILLE, FL 32210	of Business:	
Current	Mailing Address	:	
	RBAN RD. DNVILLE, FL 322	10	
FEI Nun	nber: 20-5256592		Cert
Name a	n <mark>d Address of</mark> Cu	irrent Registered Agent:	
HAWKINS 2359 URB JACKSON	,		
The above	named entity submits this	statement for the purpose of changing its registered office or	registered a
SIGNAT	URE:		
	Electronic Sig	nature of Registered Agent	
Officer/	Director Detail :		
Title	DPT	Title	DVP

DVPS Name HAWKINS, DAVID Name HAWKINS, PATRICIA 2359 URBAN RD 2359 URBAN RD Address Address City-State-Zip: City-State-Zip: JACKSONVILLE FL 32210

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: W DAVID HAWKINS

Electronic Signature of Signing Officer/Director Detail

FILED Feb 22, 2014 Secretary of State CC2863673684

Certificate of Status Desired: No

gistered agent, or both, in the State of Florida.

Date

JACKSONVILLE FL 32210

02/22/2014

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000095745

PRESIDENT

Date