

**2021 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# N20000010876

**Entity Name:** WILLIAMS SCHOOL OF CONSTRUCTION, INC.

**Current Principal Place of Business:**

3665 S ORLANDO DR SUITE 437  
SANFORD, FL 32771

**Current Mailing Address:**

3665 S ORLANDO DR  
SANFORD, FL 32771 US

**FEI Number:** 85-3301846

**Certificate of Status Desired:** No

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

WILLIE WILLIAMS  
149 CYPRESS DRIVE  
DEBARY , FL 32713 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

\_\_\_\_\_ Date

**Officer/Director Detail :**

Title P  
Name WILLIAMS, WILLIE  
Address 149 CYPRESS DRIVE  
City-State-Zip: DEBARY FL 32713

Title VP  
Name WILLIAMS, SHANTIE  
Address 4616 DU BOIS STREET STREET  
City-State-Zip: SANFORD FL 32771

Title S  
Name WILLIAMS, LATOYIA  
Address 114 HUGHES AVE  
City-State-Zip: SANFORD FL 32771

Title T  
Name WILLIAMS, DONNIE  
Address 114 HUGHES AVE  
City-State-Zip: SANFORD FL 32771

Title D  
Name WILLIAMS, MAURICE  
Address 114 HUGHES AVE  
City-State-Zip: SANFORD FL 32771

*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:** LATOYIA WILLIAMS

**SECRETARY**

**03/31/2021**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date