

2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G20434

Entity Name: WILLIAMS L T C INC.**Current Principal Place of Business:**4554 WINDMILL DR
INVERNESS, FL 34453**Current Mailing Address:**4554 WINDMILL DR
INVERNESS, FL 34453 US**FEI Number:** 59-2377912**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**WILLIAMS, GREGORY L
4554 WINDMILL DR
INVERNESS, FL 34453 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	DP
Name	WILLIAMS, GREGORY
Address	4554 WINDMILL DR
City-State-Zip:	INVERNESS FL 34453

Title	VP, D
Name	MITCHELL, BRITTAN L
Address	13735 NW 39TH STREET
City-State-Zip:	GAINESVILLE FL 32606

Title	DVP
Name	WILLIAMS, DANETTE L.
Address	4554 WINDMILL DR
City-State-Zip:	INVERNESS FL 34453

Title	VP, D
Name	WIRTHLIN, JOHN
Address	4708 W. SAN RAFAEL STREET
City-State-Zip:	TAMPA FL 33629

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: GREGORY L. WILLIAMS

PRESIDENT

06/20/2020

Electronic Signature of Signing Officer/Director Detail_____
Date