

**2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P13000091047

**Entity Name:** WILLIAMS FAMILY AUTO CARE INC.

**Current Principal Place of Business:**

1047 NW 37TH AVENUE  
CAPE CORAL, FL 33993

**Current Mailing Address:**

1047 NW 37TH AVENUE  
CAPE CORAL, FL 33993 US

**FEI Number:** 46-4079337

**Certificate of Status Desired:** No

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

UNITED STATES CORPORATION AGENTS, INC.  
5575 S. SEMORAN BLVD.  
SUITE 36  
ORLANDO,, FL 32822 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:** NATE WILLIAMS

04/26/2022

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P, D  
Name WILLIAMS, NATHAN A  
Address 1047 NW 37TH AVENUE  
City-State-Zip: CAPE CORAL FL 33993

Title T  
Name WILLIAMS, NATHAN A  
Address 1047 NW 37TH AVENUE  
City-State-Zip: CAPE CORAL FL 33993

Title S, D  
Name WILLIAMS, MELISSA D  
Address 1047 NW 37TH AVENUE  
City-State-Zip: CAPE CORAL FL 33993

*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:** NATHAN WILLIAMS

PRESIDENT

04/26/2022

Electronic Signature of Signing Officer/Director Detail

Date