



FILED
Apr 11, 2008 08:00 AM
Secretary of State

DOCUMENT # 219917 1. Entity Name WM. R. CESERY CO.																																											
Principal Place of Business 1450-3 SAN MARCO BLVD JACKSONVILLE, FL 32207 US		Mailing Address 1450-3 SAN MARCO BLVD JACKSONVILLE, FL 32207 US																																									
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		 04032008 No Chg-P CR2E034 (11/05)																																									
		<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td style="width: 80%;">4. FEI Number 59-0934378</td><td style="width: 20%;">Applied For Not Applicable</td></tr><tr><td colspan="2">5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required</td></tr></table>		4. FEI Number 59-0934378	Applied For Not Applicable	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required																																					
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6. Name and Address of Current Registered Agent CESERY, WILLIAM R. J 1450-3 SAN MARCO BLVD JACKSONVILLE, FL 32207		DO NOT WRITE IN THIS SPACE																																									
8. 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. I am familiar with, and accept the obligations of registered agent.																																											
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small>																																											
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td style="width: 50%;">9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/></td><td style="width: 50%; text-align: center; vertical-align: top;">\$5.00 May Be Added to Fees</td></tr></table>		9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees																																						
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10. OFFICERS AND DIRECTORS		<div style="border: 1px solid black; padding: 5px; display: inline-block;">1100000899752 04/23/08-90074-010 150.00</div>																																									
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.																																											
SIGNATURE: _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<div style="display: flex; justify-content: space-between;"><div>4/2/08 <small>Date</small></div><div>90A 396 960 <small>Daytime Phone #</small></div></div>																																									