

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 233107

FILED
Feb 23, 2004
Secretary of State

Entity Name: WILLIAMS COMPANY OF ORLANDO, INC.

Current Principal Place of Business:

2301 SILVER STAR ROAD
ORLANDO, FL 32804

New Principal Place of Business:

Current Mailing Address:

2301 SILVER STAR ROAD
ORLANDO, FL 32804

New Mailing Address:

FEI Number: 59-0884225

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

DEAN MEAD SERVICES, LLC
800 N. MAGNOLIA AVE.
SUITE 1500
ORLANDO, FL 32803 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSD () Delete
Name: WILLIAMS, ALAN R.
Address: 3209 MIDDLESEX RD
City-St-Zip: ORLANDO, FL

Title: VCOO () Delete
Name: LIPSCOMB, ROBERT
Address: 1831 BIMINI DR
City-St-Zip: ORLANDO, FL 32806

Title: V () Delete
Name: THOMAS-LOWERY, JANICE
Address: 2301 SILVER STAR ROAD
City-St-Zip: ORLANDO, FL

Title: CTD () Delete
Name: WILLIAMS, BRUCE E.,
Address: 2301 SILVER STAR RD
City-St-Zip: ORLANDO, FL 32804

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JANICE M THOMAS-LOWERY

VP

02/23/2004

Electronic Signature of Signing Officer or Director

Date