

# 2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 274485

FILED  
Oct 19, 2004  
Secretary of State

Entity Name: WILLIAMS AND ROWE CO.

## Current Principal Place of Business:

5215 HIGHWAY AVE  
JACKSONVILLE, FL 32254 US

## New Principal Place of Business:

## Current Mailing Address:

5215 HIGHWAY AVE  
JACKSONVILLE, FL 32254 US

## New Mailing Address:

FEI Number: 59-1026607      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

KELLY, KAREN L  
5215 HIGHWAY AVENUE  
JACKSONVILLE, FL 32254 US

## Name and Address of New Registered Agent:

KELLY, KAREN D SEC.  
5215 HIGHWAY AVENUE  
JACKSONVILLE, FL 32254 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: KAREN D. KELLY

10/19/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: V ( ) Delete  
Name: WILLIAMS, JOHN R, JR,  
Address: 6066 MEGELLAN RD  
City-St-Zip: JACKSONVILLE, FL

Title: T ( ) Delete  
Name: WILLIAMS, JANET E,  
Address: 8947 SNELLGROVE RD  
City-St-Zip: JACKSONVILLE, FL 32220

Title: D ( ) Delete  
Name: WILLIAMS, JANET E,  
Address: 8947 SNELLGROVE RD  
City-St-Zip: JACKSONVILLE, FL 32220

Title: PD ( ) Delete  
Name: WILLIAMS, JOHN R,  
Address: 8206 METTO RD  
City-St-Zip: JACKSONVILLE, FL

Title: S (X) Delete  
Name: KELLY, KAREN  
Address: 8939 SNELLGROVE AVENUE E  
City-St-Zip: JACKSONVILLE, FL 32220

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change ( ) Addition  
Name: WILLIAMS, JR., JOHN R V-PRES  
Address: 4401 SR 21  
City-St-Zip: GREEN COVE SPRINGS, FL 32043 US

Title: T (X) Change ( ) Addition  
Name: WILLIAMS, JANET E TREA.  
Address: 8947 SNELLGROVE AVE E  
City-St-Zip: JACKSONVILLE, FL 32220 US

Title: P (X) Change ( ) Addition  
Name: WILLIAMS, JOHN R PRES.  
Address: 8947 SNELLGROVE AVE E  
City-St-Zip: JACKSONVILLE, FL 32220 US

Title: S (X) Change ( ) Addition  
Name: KELLY, KAREN D SEC.  
Address: 8939 SNELLGROVE AVE E  
City-St-Zip: JACKSONVILLE, FL 32220 US

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: KAREN D. KELLY

S

10/19/2004

Electronic Signature of Signing Officer or Director

Date