## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 369371** 

Entity Name: G.J. WILLIAMS, INC.

## FILED Jul 15, 2004 Secretary of State

Current Principa	al Place of Business:	New Principal Place of Business:

6902 HAYTER DR 2110 W. PLATT STREET LAKELAND, FL 33813 US TAMPA, FL 33606 US

Current Mailing Address: New Mailing Address:

6902 HAYTER DR 2110 W. PLATT STREET LAKELAND, FL 33813 US TAMPA, FL 33606 US

FEI Number: 59-1302338 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

LIVENGOOD, BARBARA D

6902 HAYTER DR

#1

LAKELAND, FL 33813

REAL, CATHERINE W

2110 W. PLATT STREET

TAMPA, FL 33606

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: CATHERINE W. REAL 07/15/2004

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD ( ) Delete Title: PSTD (X) Change ( ) Addition Name: REAL, CATHERINE W REAL, CATHERINE W

 Name:
 REAL, CATHERINE W
 Name:
 REAL, CATHERINE W

 Address:
 2110 W PLATT ST
 2110 W PLATT ST

 City-St-Zip:
 TAMPA, FL 33606
 City-St-Zip:
 TAMPA, FL 33606

Title: SD (X) Delete Title: ( ) Change ( ) Addition

 Name:
 LIVENGOOD, BARBARA D,
 Name:

 Address:
 6902 HAYTER DRIVE
 Address:

 City-St-Zip:
 LAKELAND, FL
 City-St-Zip:

Title: ST (X) Delete Title: ( ) Change ( ) Addition

 Name:
 LIVENGOOD, BARBARA D
 Name:

 Address:
 602 HAYTER DRIVE
 Address:

 City-St-Zip:
 LAKELAND, FL 33813
 City-St-Zip:

Title: VPD (X) Delete Title: ( ) Change ( ) Addition

 Name:
 REAL, CATHERINE W
 Name:

 Address:
 2110 W PLATT ST
 Address:

 City-St-Zip:
 TAMPA, FL 33606
 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: CATHERINE W. REAL P 07/15/2004