FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

538631 DOCUMENT #

1. Corporation Name

(3)

DICK WILLIAMS, INC.



					\$ \$ \$ \$ \$ \$ \$ \$ \$			
rincipal Place of E		Mailing Address	040					
121 STONE PO	ST ROAD	121 STONE POST RI	UAD 79-2746					
LONGWOOD FL 32779-2746 LONGWOOD FL 32779-2746					Date Incorporated or Qualified 3a. Date of Last Report			
					07/05/1977	04/	04/199	
-	-f D minnes	2a. Mailing Address			4. FEI Number		—	plied For
. Principal Place	Ot Briguiess	26			59-1760696			ot Applicable
Suite, Apt. #, e	nic.	Suite, Apt #, etc.			5. Certificate of Status Desired		ל 67.84 Fee Re	Additional aduired
		27			6. Election Campaign Financing			May Be
City & State		City & State			Trust Fund Contribution		-	to Fees
		[28]	Country		This corporation has liability for its content of the second of the	intangible tax u	inder s 1	99.032.
Zip	Country	Z ₍₂₎	30		Florida Statutes Y Yes	☐ No		
	9. Name and Address of Currer	29 Agent			10. Name and Address o New R	legistered Ag	ent	
	9. Name and Address of Currer	it riegistered / ig-	81	Name				
	o moudon n		82	Street Addr	ess (P.O. Box Number is Not Acceptat	ole)		
WILLIAM	s, richard r. Ne post road		0.2	Street, Addi				
121 510	OOD FL 32779		83					
LUNGWE	JOD FL 32119		84	City			85 Zip	Code
			1 -	1 '	ration submits this statement for the purify of directors. Thereby accept the app	FL		
IGNATURE	grature, typed or printed name of registers duger		NOTE Fag cried Ag	ent signature reduire	ADDITIONS/CHANGES TO OF	DATE FICERS AND E	IRECTO	RS IN 12
2.	OFFICERS AN	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OF		Ohange	Addition
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I do ribreby certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as it made under certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as it made under certify that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chargest or changest or on an appears in Block 12 or Block to changest or on an appears with an address

2-26-56