

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

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **687899** (5)

1. Corporation Name
LARRY V. WILLIAMS, D.D.S., P.A.



Principal Place of Business: **1331 PALMDALE STREET C/O LARRY V. WILLIAMS JACKSONVILLE FL 32208**
Mailing Address: **1331 PALMDALE STREET C/O LARRY V. WILLIAMS JACKSONVILLE FL 32208**

2. Principal Place of Business (21) Suite, Apt. #, etc. (22) City & State (23) Zip (24) Country (25)
2a. Mailing Address (26) Suite, Apt. #, etc. (27) City & State (28) Zip (29) Country (30)

3. Date Incorporated or Qualified: **09/16/1980**
3a. Date of Last Report: **10/13/1995**
4. FLL Number: **59-2049091** Applied For Not Applicable
5. Certificate of Status Desired: **\$8.75 Additional Fee Required**
6. Election Campaign Financing Trust Fund Contribution: **\$5.00 May Be Added to Fees**
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

9. Name and Address of Current Registered Agent

**WILLIAMS, LARRY V.
1331 PALMDALE STREET
JACKSONVILLE FL 32208**

10. Name and Address of New Registered Agent (81) Name (82) Street Address (P.O. Box Number is Not Acceptable) (83) City (84) City (85) Zip Code **FL**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature of the person performing the filing (if not the filer) (Date)

Signature of the Agent or Director (if not the filer) (Date)

(Date)

12. OFFICERS AND DIRECTORS
P WILLIAMS, LARRY V. 1331 PALMDALE ST. JACKSONVILLE FL
P WILLIAMS, CAROLYN E. 1331 PALMDALE ST. JACKSONVILLE FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
11 TITLE Change Addition
12 NAME
13 STREET ADDRESS
14 CITY- ST- ZIP Change Addition
15 TITLE
16 NAME
17 STREET ADDRESS
18 CITY- ST- ZIP Change Addition
19 TITLE
20 NAME
21 STREET ADDRESS
22 CITY- ST- ZIP Change Addition
23 TITLE
24 NAME
25 STREET ADDRESS
26 CITY- ST- ZIP Change Addition
27 TITLE
28 NAME
29 STREET ADDRESS
30 CITY- ST- ZIP Change Addition
31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY- ST- ZIP Change Addition
35 TITLE
36 NAME
37 STREET ADDRESS
38 CITY- ST- ZIP Change Addition
39 TITLE
40 NAME
41 STREET ADDRESS
42 CITY- ST- ZIP Change Addition
43 TITLE
44 NAME
45 STREET ADDRESS
46 CITY- ST- ZIP Change Addition
47 TITLE
48 NAME
49 STREET ADDRESS
50 CITY- ST- ZIP Change Addition
51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY- ST- ZIP Change Addition
55 TITLE
56 NAME
57 STREET ADDRESS
58 CITY- ST- ZIP Change Addition
59 TITLE
60 NAME
61 STREET ADDRESS
62 CITY- ST- ZIP Change Addition
63 TITLE
64 NAME
65 STREET ADDRESS
66 CITY- ST- ZIP Change Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further 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 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 12 or Block 13 if changed, or on an attachment, and an address.

SIGNATURE: *Larry V. Williams* **LARRY V WILLIAMS, DDS 2/10/96** 909 7651614
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)