

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 821317

FILED  
Feb 08, 2007  
Secretary of State

Entity Name: WILLIAMS ENTERPRISES OF GEORGIA INC

## Current Principal Place of Business:

1285 HAWTHORNE AVE.  
P.O. BOX 756  
SMYRNA, GA 30081

## New Principal Place of Business:

1285 HAWTHORNE AVE.  
SMYRNA, GA 30081

## Current Mailing Address:

1285 HAWTHORNE AVE.  
P.O. BOX 756  
SMYRNA, GA 30081 US

## New Mailing Address:

1285 HAWTHORNE AVE.  
P O BOX 756  
SMYRNA, GA 30081 US

FEI Number: 58-1020223

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION, FL 33324 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: S/D ( ) Delete  
Name: TORCHO, PHILIP III  
Address: 1305 IDLEWYLD DR  
City-St-Zip: MARIETTA, GA 30064

Title: D ( ) Delete  
Name: WILLIAMS, FRANK E JR, .  
Address: 3008 CYRANDALL VALLEY RD  
City-St-Zip: MERRIFIELD, VA

Title: D ( ) Delete  
Name: WILLIAMS, A DALE,  
Address: 110 CONCORD RD S E  
City-St-Zip: SMYRNA, GA

Title: D ( ) Delete  
Name: BRYAN, SHARON A CFO  
Address: 9215 HIDDEN MOUNTAIN DRIVE  
City-St-Zip: CHATTANOOGA, TN 37421

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO (X) Change ( ) Addition  
Name: TORCHO, PHILIP III  
Address: 1305 IDLEWYLD DR  
City-St-Zip: MARIETTA, GA 30064

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

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

Title: D/S (X) Change ( ) Addition  
Name: BRYAN, SHARON A CFO  
Address: 9215 HIDDEN MOUNTAIN DRIVE  
City-St-Zip: CHATTANOOGA, TN 37421

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: SHARON A. BRYAN

CFO

02/08/2007

Electronic Signature of Signing Officer or Director

Date