2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 854749

FILED Mar 04, 2004 Secretary of State

Entity Name: WILLIAMS CONSTRUCTION MANAGEMENT, INC.

Current Principal Place of Business: New Principal Place of Business: 535 COLISEUM DRIVE (31201) 535 COLISEUM DRIVE P. O. BOX 4604 MACON, GA 31217 MACON, GA 312084604 **Current Mailing Address: New Mailing Address:** 535 COLISEUM DRIVE (31201) P O BOX 4604 P. O. BOX 4604 MACON, GA 312084604 MACON, GA 312084604 FEI Number: 58-1031577 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: CORPORATION SERVICE COMPANY 1201 HAYS STREET SUITE 105 TALLAHASSEE, FL 32301 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: CFO (X) Change () Addition WILLIAMS, FLOYD B., WILLIAMS, FLOYD B Name: Name: 3711 EL DORADO DRIVE 3711 EL DORADO DRIVE Address: Address: City-St-Zip: MACON, GA 31204 City-St-Zip: MACON, GA 31204 SVP Title: Title: () Delete () Change () Addition Name: H. MORRIS, JACKSON Name: 859 WERA PLACE Address: Address: City-St-Zip: MACON, GA 31210 City-St-Zip: Title: Title: () Delete () Change () Addition WILLIAMS, CAROLYN C. Name: Name: 3711 EL DORADO DRIVE Address: Address: MACON, GA 31204 City-St-Zip: City-St-Zip: Title: () Delete Title: () Change () Addition WILLIAMS, M. TOL Name: Name: Address: 4582 OXFORD CIRCLE Address: City-St-Zip: MACON, GA 31210 City-St-Zip: Title: Title: () Delete () Change () Addition WILLIAMS, JAMES F. Name: Name: 17 OLD BENTON ROAD Address: Address: City-St-Zip: JULIETTE, GA 31046 City-St-Zip: () Delete Title: Title: () Change () Addition GRANT, WES Name: Name: 4805 GRAFTON COURT Address: Address: City-St-Zip: City-St-Zip: SUWANEE, GA 30174

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: FLOYD B WILLIAMS CEO 03/04/2004