

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06377

FILED  
Jan 16, 2006  
Secretary of State

Entity Name: WILLIAM JOHN ASSOCIATES INC.

**Current Principal Place of Business:**

660 W. KENNEDY BLVD.  
ORLANDO, FL 32810

**New Principal Place of Business:**

7431 MOTT AVENUE  
ORLANDO, FL 32810

**Current Mailing Address:**

P.O. BOX 941959  
MAITLAND, FL 327941959

**New Mailing Address:**

FEI Number: 59-2030623      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

WALLACE, JOHN D PRES  
P.O. 941959  
MAITLAND, FL 327941959 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: PDT ( ) Delete  
Name: WALLACE, JOHN D PRES  
Address: P.O. 941959  
City-St-Zip: MAITLAND, FL 327941959 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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: JOHN D WALLACE

PRES

01/16/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date