

**2004 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Jul 09, 2004 8:00 am**  
**Secretary of State**

07-09-2004 90092 023 \*\*\*\*50.00

**DOCUMENT # L01000000271**

1. Entity Name  
**MORRIS A. WILLIAMS, JR., P.L.**



Principal Place of Business  
**3403 TECHNOLOGICAL AVE STE 12  
ORLANDO, FL 32817**

Mailing Address  
**3403 TECHNOLOGICAL AVE STE 12  
ORLANDO, FL 32817**

**DO NOT WRITE IN THIS SPACE**



02262004 No Chg-LLC

CR2E083 (10/03)

4. FEI Number  
**59-3696800**

Applied For  
☐ Not Applicable

5. Certificate of Status Desired ☐

**\$5.00 Additional  
Fee Required**

**6. Name and Address of Current Registered Agent**

**WILLIAMS, JR. MORRIS A  
851 BUENA VENTURA BLVD  
KISSIMMEE, FL 34743**

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title, if applicable.

(NOTE: Registered Agent signature required when reappointing)

DATE

**Filing Fee is \$50.00  
Due by May 1, 2004**

**9. MANAGING MEMBERS/MANAGERS**

TITLE	MGRM
NAME	WILLIAMS, JR. MORRIS A
STREET ADDRESS	14 SEVILLE CHASE DRIVE 3403 Technological Ave
CITY - ST - ZIP	WINTER SPRING, FL 32788 Suite 12
TITLE	
NAME	
STREET ADDRESS	Orlando, Fl. 32817
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

**DO NOT WRITE  
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

**SIGNATURE:**

*Morris A. Williams, Jr.*

**2-24-04**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #