

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000058730

Entity Name: WILLIAMS TRUST, LLC

FILED
Mar 12, 2007
Secretary of State

Current Principal Place of Business:

1300 N. 15TH STREET
IMMOKALEE, FL 34103 US

New Principal Place of Business:

Current Mailing Address:

1300 N. 15TH STREET
IMMOKALEE, FL 34103 US

New Mailing Address:

FEI Number: 59-3475195

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CLASP, INC.
3001 TAMiami TRAIL N.
4TH FLOOR
NAPLES, FL 34103 US

Name and Address of New Registered Agent:

WILLIAMS, CARRIE
1300 NORTH 15TH STREET
IMMOKALEE, FL 34142 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: CARRIE WILLIAMS

03/12/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: WILLIAMS, CARRIE E
Address: 1300 N. 15TH STREET
City-St-Zip: IMMOKALEE, FL 34103 US

Title: MGR () Delete
Name: WILLIAMS, JAMES E III
Address: 1300 N. 15TH STREET
City-St-Zip: IMMOKALEE, FL 34103 US

ADDITIONS/CHANGES:

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

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 is true and accurate and that my electronic 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: CARRIE WILLIAMS

MGR

03/12/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date