

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L36634

FILED
Feb 09, 2010
Secretary of State

Entity Name: WILLIAMS FARMS OF IMMOKALEE, INC.

Current Principal Place of Business:

CARRIE WILLIAMS
1300 NORTH 15TH STREET SUITE#1
IMMOKALEE, FL 34142

New Principal Place of Business:

1300 NORTH 15TH STREET
SUITE#1
IMMOKALEE, FL 34142

Current Mailing Address:

CARRIE WILLIAMS
1300 NORTH 15TH STREET SUITE#1
IMMOKALEE, FL 34142

New Mailing Address:

1300 NORTH 15TH STREET
SUITE#1
IMMOKALEE, FL 34142

FEI Number: 65-0159189

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CARRIE WILLIAMS
1300 NORTH 15TH STREET SUITE#1
IMMOKALEE, FL 34142 US

Name and Address of New Registered Agent:

CARRIE, WILLIAMS E
1300 NORTH 15TH STREET SUITE#1
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 E. WILLIAMS

02/09/2010

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP
Name: WILLIAMS, DIANE R.
Address: 1300 NORTH 15TH STREET
City-St-Zip: IMMOKALEE, FL

Title: STD
Name: WILLIAMS, CARRIE
Address: 1300 NORTH 15TH STREET
City-St-Zip: IMMOKALEE, FL 34142

Title: D
Name: BLUST, SUSAN
Address: 1300 NORTH 15TH STREET SUITE#1
City-St-Zip: IMMOKALEE, FL 34142

Title: D
Name: WILLIAMS, JOHN
Address: 1300 NORTH 15TH STREET SUITE#1
City-St-Zip: IMMOKALEE, FL 34142

Title: D
Name: WILLIAMS, JAMES E
Address: 1300 NORTH 15TH STREET SUITE#1
City-St-Zip: IMMOKALEE, FL 34142

I hereby 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 all other like empowered.

SIGNATURE: CARRIE E WILLIAMS

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02/09/2010

Electronic Signature of Signing Officer or Director

Date