

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L59562

**FILED**  
**Feb 03, 2007**  
**Secretary of State**

**Entity Name:** SUSAN J. WILLIAMS, P.A.

**Current Principal Place of Business:**

5250 S. US HWY., 17-92  
CASSELBERRY, FL 32707

**New Principal Place of Business:**

280 SOUTH RONALD REAGAN BLVD  
100  
LONGWOOD, FL 32750

**Current Mailing Address:**

5250 S. US HWY., 17-92  
CASSELBERRY, FL 32707

**New Mailing Address:**

P.O. BOX 522196  
LONGWOOD, FL 32752 21

**FEI Number:** 59-3018840

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WILLIAMS, SUSAN J.  
5250 SOUTH US HWY 17-92  
CASSELBERRY, FL 32707 US

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

WILLIAMS, SUSAN J.  
280 S. RONALD REAGAN BLVD  
100  
LONGWOOD, FL 32750 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: SUSAN J. WILLIAMS

02/03/2007

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: WILLIAMS, SUSAN J.  
Address: 5250 S. US HWY., 17-92  
City-St-Zip: CASSELBERRY, FL 32707

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

Title: PD (X) Change ( ) Addition  
Name: WILLIAMS, SUSAN J.  
Address: P.O. BOX 522196  
City-St-Zip: LONGWOOD, FL 32752

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: SUSAN J. WILLIAMS

P

02/03/2007

Electronic Signature of Signing Officer or Director

Date