

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # L77146

1. Entity Name
WILLIS INVESTMENTS, INC.



Principal Place of Business
**GREENSBORO FLA
GREENSBORO, FL 32330**

Mailing Address
**P.O. BOX 97
GREENSBORO, FL 32330**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**WILLIS, W. E. SR.
961 PROVIDENCE RD
GREENSBORO, FL 32330**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent the obligations of registered agent.

SIGNATURE _____

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

(NOTE: Registered Agent signature required when not

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 Me
Added to Fee

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P/D
WILLIS, W. E.
961 PROVIDENCE RD
GREENSBORO, FL 32330**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 607, Florida Statutes, if made under oath; that I am an officer or director and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED

**Jan 17, 2007 08:00 AM
Secretary of State**



No Chg-P CR2E034 (11/05)

2250 Applied For
Not Applicable

of Status Desired ☐ **\$8.75 Additional
Fee Required**

**NOT WRITE
IN THIS SPACE**

in the State of Florida. I am familiar with, and accept

000000588531
01/18/07-80019-023 150.00

**DO NOT WRITE
IN THIS SPACE**

Florida Statutes. I further certify that the information
if made under oath; that I am an officer or director
and that my name appears in Block 10 or Block 11 if

-07 (850) 575-6974
Date Daytime Phone #