2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L9900006437 1. Entity Name WILLIAMS CONSTRUCTION AND DESIGN, L.C.				1 \	OD MAY 16 PM 3: 36 SECRETARY OF STATE TALLAHASSEE, FLORIDA		
Principal Place 1371 SILVER N TALLAHASSEE	MOON DRIVE	Mairing Address 1371 SILVER MOON DRIVE TALLAHASSEE FL 32312-3934	4	T A B RABATA DE LA REGIA MACANA BORRA BORR			
2. Principal Place of Business 3. Mailing Ad		. Mailing Address	ng Address				
Suite, Apt. #, etc. S		Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE			
City & State C		City & State	ity & State		4. FEI Number		
Zip	Country	Zip	Country		5. Certificate of Status Desired		
6. Name and Address of Current Registered Agent			Name	7. Name and Address of New Registered Agent			
WILLIAMS, C. BLAIR 1371 SILVER MOON DRIVE TALLAHASSEE FL 32312				Street Address (P.O. Box Number is Not Acceptable)			
			City FL Zip Code			ode	
	Signature, typed or printed name of registered agent and tin MANAGING MEMBERS.	FILE NOW Make Check Payat	rgistered Agent signature in 7!!! FEE IS \$50 ble to Departme	.00 nt of State	DITIONS/CHANGES •		
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR. C. Blair Williams 1371 Silver Moon Tallahassee	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	President C. Blair Williams 1371 Silver Ma Talla hassee	☐ Change	Adultion	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	- 1 4 1 4 4 5 S. L. O.	□ Delette	TITLE NAME STREET ADDRESS CITY-ST-ZIP		Champs	Addition	
NAME STREET ADDRESS CITY-ST-ZIP		Celeta	TITLE HAME STREET ADDRESS CITY-ST-ZIP		16/07/00=-01016- ****50.00 *****	008 Addition 50.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Deleta	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change	Addition	
TITLE MAME STREET ADDRESS CITY-ST-ZIP	* * * * * * * * * * * * * * * * * * * *	☐ Defects	TITLE NAME STREET ADDRESS CITY-ST-ZIP	•	Change	Addition	
TITLE MAME STREET ADDRESS CITY-87-ZIP	•	□ Delets	TITLE NAME STREET ADDRESS CITY-ST-ZIP		Change	Addition	
indicated	ertify that the information supplied with this on this report is true and accurate and that oility company or the receiver or trustee em	my signature shall have the	same legal effect a	is if made under oath; that I am	Statutes. I further certify that the a managing member or managing mem	e information ger of the	

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

850-668-7022