FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 JUN 13 PM 3:23

DOCUMENT # M87262

1. Corporation Name

Ted R. Williams Enterprises, Inc.

Principal Place of Business: 2636 22 St N. St. Petersburg, FL 33713

Mailing Address: Same

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified	06-22-1988
3a. Date of Last Report	1994
4. FEI Number	59-2896003 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired	☒ $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution	☐ $5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes	☒ Yes ☐ No

2. Principal Place of Business
21 ___
22 Suite, Apt. #, etc. ___
23 City & State ___
24 Zip ___ 25 Country ___

2a. Mailing Address
26 ___
27 Suite, Apt. #, etc. ___
28 City & State ___
29 Zip ___ 30 Country ___

9. Name and Address of Current Registered Agent

Ted Williams
5793 73rd Street N.
St. Petersburg, FL 33709

10. Name and Address of New Registered Agent

61 Name ___
62 Street Address (P.O. Box Number is Not Acceptable) ___
63 ___
64 City ___ FL 65 Zip Code ___

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE ___

12. OFFICERS AND DIRECTORS

TITLE	D
NAME	Williams, Ted
STREET ADDRESS	5793 73 St N.
CITY-ST-ZIP	St. Petersburg, FL 33709
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

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14. I do hereby certify that the information supplied with this filing is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: [signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: 6-5-95 Daytime Phone #: 813-821-9996