2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000003107

FILED Mar 06, 2005 Secretary of State

Entity Name: WILLIAMS PLACE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

7586 HAYFIELD CIRCLE 7563 HAYFIELD CIRCLE PENSACOLA, FL 32526 PENSACOLA, FL 32526

Current Mailing Address: New Mailing Address:

7586 HAYFIELD CIRCLE 7563 HAYFIELD CIRCLE PENSACOLA, FL 32526 PENSACOLA, FL 32526

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

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

RAMIREZ, JAYE C MILLER, KANDIS K 7586 HAYFIELD CIRCLE 7563 HAYFIELD CIRCLE US US PENSACOLA, FL 32526 PENSACOLA, FL 32526

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: KANDIS K. MILLER 03/06/2005

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition RAMIREZ, JAYE C MILLER, KANDIS K Name: Name:

7586 HAYFIELD CIRCLE Address: 7563 HAYFIELD CIRCLE Address: City-St-Zip: PENSACOLA, FL 32526 City-St-Zip: PENSACOLA, FL 32526

Title: VD Title: VD (X) Change () Addition () Delete

BOND, PETE Name: REDWINE, TRACI Name: Address: 7453 FARMERS ROAD Address: 7435 FARMERS RD City-St-Zip: PENSACOLA, FL 32526 City-St-Zip: PENSACOLA, FL 32526

Title: () Delete Title: PD (X) Change () Addition UCTUM, EROL BOND, PETE Name: Name:

7453 FARMERS ROAD Address: 7478 FARMERS ROAD Address:

City-St-Zip: PENSACOLA, FL 32526 City-St-Zip: PENSACOLA, FL 32526

Title: SD () Delete Title: SD (X) Change () Addition

Name: HOLLINGSHEAD, MEGAN K Name: JONES, ANGIE 7579 HAYFIELD CIRCLE Address: 7448 FARMERS ROAD Address: City-St-Zip: PENSACOLA, FL 32526 City-St-Zip: PENSACOLA, FL 32526

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KANDIS K. MILLER TD 03/06/2005