


# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 22, 2007 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # N18446</b>	
1. Entity Name <b>FRANK WILLIAMS FOUNDATION, INC.</b>	

Principal Place of Business <b>% FRANK M. WILLIAMS MD. 1211 REYNOLDS AVENUE CLEARWATER, FL 33756 US</b>	Mailing Address <b>% FRANK M. WILLIAMS MD. 1211 REYNOLDS AVENUE CLEARWATER, FL 33756 US</b>
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DO NOT WRITE IN THIS SPACE



01132007 No Chg-NP CR2E037 (4/06)

4. FEI Number <b>59-2786891</b>	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	

6. Name and Address of Current Registered Agent

**WILLIAMS, FRANK M MD  
1211 REYNOLDS AVE  
CLEARWATER, FL 33756**

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

<b>Filing Fee is \$61.25 Due by May 1, 2007</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>DAS WILLIAMS, FRANK M 1211 REYNOLDS AVENUE CLEARWATER, FL 33756</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D WILLIAMS, JACQUELINE 1211 REYNOLDS AVE. CLEARWATER, FL 33756</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D FLOOD, RUTH E 1211 REYNOLDS AVENUE CLEARWATER, FL 33756</b>
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01/23/07-80075-008 70.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Frank M. Williams **Frank M. Williams** Jan. 13, 2007 727-446-1061

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #