2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000033308

Entity Name: GT WILLIAMS, INC.

City-St-Zip:

Title:

Name:

Address:

City-St-Zip:

OCALA, FL 34474

OCALA, FL 34474

WILLIAMS, GREGORY T

3407 SW 7TH STREET

() Delete

FILED Mar 18, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 3407 SW 7TH STREET OCALA, FL 34474 **Current Mailing Address: New Mailing Address:** 3407 SW 7TH STREET OCALA, FL 34474 FEI Number: 59-3647876 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: WILLIAMS, GREGORY T 3407 SW 7TH STREET OCALA, FL 34474 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition WILLIAMS, GREGORY T WILLIAMS, GREGORY T Name: Name: 3407 SW 7TH STREET 3407 SW 7TH STREET Address: Address: City-St-Zip: OCALA, FL 34474 City-St-Zip: OCALA, FL 34474 Title: Title: () Delete (X) Change () Addition Name: WILLIAMS, ERIC R JR Name: WILLIAMS, GREGORY T 3500 SW 54 COURT 3407 SW 7TH ST Address: Address: OCALA, FL 34474 OCALA, FL 34474 City-St-Zip: City-St-Zip: () Delete Title: (X) Change () Addition Title: WILLIAMS, ERIC R JR WILLIAMS, GREGORY T Name: Name: 3500 SW 54 COURT 3407 SW 7TH ST Address: Address:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

Title:

Name:

Address:

City-St-Zip:

OCALA, FL 34474

() Change () Addition

SIGNATURE: GREGORY T. WILLIAMS **PRES** 03/18/2008