

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000068965

Entity Name: WILLIAMS SYSTEMS GROUP, INC.

FILED
Apr 30, 2005
Secretary of State

Current Principal Place of Business:

8787 SOUTHSIDE BLVD
SUITE # 802
JACKSONVILLE, FL 32256

Current Mailing Address:

8787 SOUTHSIDE BLVD
SUITE # 802
JACKSONVILLE, FL 32256

New Principal Place of Business:

10100 BAYMEADOWS RD
SUITE # 1508
JACKSONVILLE, FL 32256

New Mailing Address:

10100 BAYMEADOWS RD
SUITE # 1508
JACKSONVILLE, FL 32256

FEI Number: 59-3732091

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILLIAMS, KYRON
8787 SOUTHSIDE BLVD
SUITE # 802
JACKSONVILLE, FL 32256 US

Name and Address of New Registered Agent:

WILLIAMS, KYRON
10100 BAYMEADOWS RD
SUITE # 1508
JACKSONVILLE, FL 32256 US

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:

04/30/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPVS () Delete
Name: WILLIAMS, KYRON
Address: 8787 SOUTHSIDE BLVD #802
City-St-Zip: JACKSONVILLE, FL 32256

Title: T () Delete
Name: WILLIAMS, KYRON
Address: 8787 SOUTHSIDE BLVD #802
City-St-Zip: JACKSONVILLE, FL 32256

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPVS (X) Change () Addition
Name: WILLIAMS, KYRON
Address: 10100 BAYMEADOWS RD SUITE # 1508
City-St-Zip: JACKSONVILLE, FL 32256

Title: T (X) Change () Addition
Name: WILLIAMS, KYRON
Address: 10100 BAYMEADOWS RD SUITE # 1508
City-St-Zip: JACKSONVILLE, FL 32256

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KYRON WILLIAMS

PRES

04/30/2005

Electronic Signature of Signing Officer or Director

Date