

FILED
Jul 03, 2003 8:00 am
Secretary of State

07-03-2003 90032 001 ***150.00

2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

80128300

DOCUMENT # P01000096240		
1. Entity Name WILLIAMS, LIVINGSTON & ASSOCIATES, P.A.		
Principal Place of Business 300 SMITH ORANGE AVE STE 1500 ORLANDO, FL 32801		Mailing Address 300 SMITH ORANGE AVE STE 1500 ORLANDO, FL 32801
2. Principal Place of Business 300 South Orange Ave.		3. Mailing Address 300 South Orange Ave.
Suite, Apt. #, etc. Suite 800		Suite, Apt. #, etc. Suite 800
City & State Orlando, FL		City & State Orlando, FL
Zip 32801	Country USA	Zip 32801
4. FEI Number 01-0549443		Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent LIVINGSTON, SCOTT A 300 SMITH ORANGE AVE STE 1500 ORLANDO, FL 32801		
7. Name and Address of New Registered Agent Name Scott A. Livingston Street Address (P.O. Box Number is Not Acceptable) 300 South Orange Ave. Suite 800 City Orlando FL Zip Code 32801		
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's signature required when appointing)		
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State		
9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD WILLIAMS, CHARLES E JR. 300 SMITH ORANGE AVE STE 1500 ORLANDO, FL 32801 ☐ Delete	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD LIVINGSTON, SCOTT A 300 SMITH ORANGE AVE STE 1500 ORLANDO, FL 32801 ☐ Delete	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD Charles E. Williams, Jr. 300 South Orange Ave Suite 800 Orlando, FL 32801 ☒ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD Scott A. Livingston 300 South Orange Ave Suite 800 Orlando, FL 32801 ☒ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
12. I hereby certify that the information supplied with this filing does not qualify 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.		
SIGNATURE: <u>Scott A. Livingston</u> Date 7/1/03 407-244-7480		

CR2E034 (10/02)