


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jul 07, 2006 08:00 AM
Secretary of State

DOCUMENT # P02000051421 1. Entity Name WILLIAMS REAL ESTATE & MANAGEMENT CORP.	
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Principal Place of Business 1100 CLUBHOUSE BLVD. NEW SMYRNA BCH, FL 32168	Mailing Address 1100 CLUBHOUSE BLVD. NEW SMYRNA BCH, FL 32168
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07042006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 01-0676755	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

WILLIAMS, DONNIE H
1100 CLUBHOUSE BLVD.
NEW SMYRNA BCH, FL 32168

DO NOT WRITE IN THIS SPACE

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 _____
Signature, typed or printed name of registered agent and title if applicable.

FILE NOW!!! FEE IS \$150.00 Due by September 6, 2006	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	P WILLIAMS, DONNIE H 1100 CLUBHOUSE NEW SMYRNA BCH, FL 32168
TITLE NAME STREET ADDRESS CITY - ST - ZIP	ST WILLIAMS, MARLENE B 1100 CLUBHOUSE BLVD. NEW SMYRNA BCH, FL 32168
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U00000568563
07/07/06-80014-007 150.00

U00000568563
07/07/06-80014-008 8.75

DO NOT WRITE IN THIS SPACE

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 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: *Donnie H. Williams* **7/4/06** **386-428-2656**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #