2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000107217

Name:

Address:

City-St-Zip:

WILLIAMS, TIFFANY

DUNEDIN, FL 34698

929 BROADWAY

Entity Name: WILLIAMS WINDOW TREATMENTS, INC.

FILED Apr 20, 2009 Secretary of State

Current P	rincipal Plac	e of Business:	New Principal Place	New Principal Place of Business:	
929 BROA DUNEDIN	DWAY , FL 34698				
Current Mailing Address:			New Mailing Address	New Mailing Address:	
929 BROA DUNEDIN	DWAY , FL 34698				
FEI Number	: 03-0485559	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:	
695 BAYSI TARPON : The above	SPRINGS, FL		purpose of changing its registered	d office or registered agent, or both,	
SIGNATU					
Election Car		onic Signature of Registered Ag	gent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGI	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD (WILLIAMS, PA 929 BROADW DUNEDIN, FL	/AY	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VD (WILLIAMS, R 929 BROADW DUNEDIN, FL	/AY	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	STD () Delete	Title:	() Change () Addition	

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.

Name:

Address:

City-St-Zip:

SIGNATURE: ROBERT S. WILLIAMS VD 04/20/2009