

2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000044178

Entity Name: ROBERT WILLIS,INC

FILED
Apr 22, 2006
Secretary of State

Current Principal Place of Business:

12017 CANCUN DR
JACKSONVILLE, FL 32225

New Principal Place of Business:

Current Mailing Address:

545 SEGOVIA RD
ST AUGUSTINE, FL 32086

New Mailing Address:

737 MEDINA AVE
ST AUGUSTINE, FL 32086

FEI Number: 83-0357978

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

WILLIS, ROBERT M
545 SEGOVIA RD
ST AUGUSTINE, FL 32086 US

Name and Address of New Registered Agent:

WILLIS, ROBERT G
737 MEDINA AVE
ST AUGUSTINE, FL 32086 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: ROBERT G WILLIS

04/22/2006

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: WILLIS, ROBERT G
Address: 545 SEGOVIA RD
City-St-Zip: ST AUGUSTINE, FL 32086

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: WILLIS, ROBERT G
Address: 737 MEDINA AVE
City-St-Zip: ST AUGUSTINE, FL 32086

I hereby certify that the information supplied with this filing does not qualify for the 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.

SIGNATURE: ROBERT G WILLIS

P

04/22/2006

Electronic Signature of Signing Officer or Director

Date