2007 FOR PROFIT CORPORATION ANNUAL REPORT

Jul 27, 2007 08:00 AM Secretary of State DOCUMENT # P04000078899 1. Entity Name W.H. WILLIAMS CONSTRUCTION, INC. Principal Place of Business Mailing Address P 0 BOX 138 P 0 BOX 138 KEY LARGO, FL 33037 KEY LARGO, FL 33037 No Chg-P 07112007 DO NOT WRITE IN THIS SPACE CR2E034 /11/05) 4. FEI Number Applied For 20-1284235 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent WILLIAMS, WH DO NOT WRITE 46 HIBISCUS LN KEY LARGO, FL 33037 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. U00000770710 07/27/07-80003-015 150.00 SIGNATURE Signature, typed or printed name of registered agent and title it applicable (NOTE, Registered Agent signature required when reinstalling) 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 \$5.00 May Be In accordance with s. 607.193(2)(b), F.S., the Trust Fund Contribution. Added to Fees corporation did not receive the prior notice. Due by September 14, 2007 10. OFFICERS AND DIRECTORS TITLE D WILLIAMS, WH NAME 46 HIBISCUS LN STREET ADDRESS KEY LARGO, FL 33037 CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE DO NOT WRITE STREET ADDRESS CITY-ST-ZIP IN THIS SPACE MILE STREET ADDRESS CITY-SY-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITEF NAME STREET ADDRESS

12. Thereby certify that the Information supplied with this filling 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:* WH A

CHY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

x 9 = 25

X 07

FILED