

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000115379

Entity Name: WILLIAMS & SEIXAS INC

FILED
May 02, 2007
Secretary of State

Current Principal Place of Business:

259 SW PORT ST LUCIE BLVD
PORT ST LUCIE, FL 34984

New Principal Place of Business:

Current Mailing Address:

259 SW PORT ST LUCIE BLVD
PORT ST LUCIE, FL 34984

New Mailing Address:

FEI Number: 20-1814602

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILLIAMS, GLEN
259 SW PORT ST LUCIE BLVD
PORT ST LUCIE, FL 34984 US

Name and Address of New Registered Agent:

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:

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: WILLIAM, NYDIA
Address: 5407 STORK CT
City-St-Zip: TAMPA, FL 33625

Title: VP () Delete
Name: WILLIAMS, GLEN
Address: 5407 STORK CT
City-St-Zip: TAMPA, FL 33625

Title: T () Delete
Name: SEIXAS, GEORGIA
Address: 5407 STORK CT
City-St-Zip: TAMPA, FL 33625

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: WILLIAMS, GLEN
Address: 11000 OYSTER BAY CIRCLE
City-St-Zip: NEW PORT RICHEY, FL 34946

Title: T (X) Change () Addition
Name: SEIXAS, GEORGIA
Address: 11000 OYSTER BAY CIRCLE
City-St-Zip: NEW PORT RICHEY, FL 34946

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.

SIGNATURE: GLEN WILLIAMS

P

05/02/2007

Electronic Signature of Signing Officer or Director

Date