

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000115379

Entity Name: WILLIAMS & SEIXAS INC

FILED
Apr 30, 2009
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

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: 11000 OYSTER BAY CIRCLE
City-St-Zip: NEW PORT RICHEY, FL 34946

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change () Addition
Name: WILLIAM, NYDIA
Address: 5407 STORK CT
City-St-Zip: TAMPA, FL 33625 US

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

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 E. WILLIAMS

PRES

04/30/2009

Electronic Signature of Signing Officer or Director

Date