

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000122656

FILED
Oct 25, 2007
Secretary of State

Entity Name: PROPERTY MAINTENANCE BY WILLIAMS, INC.

Current Principal Place of Business:

4929 ATLANTIC BOULEVARD
JACKSONVILLE, FL 32207 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 19623
JACKSONVILLE, FL 32246 US

New Mailing Address:

FEI Number: 20-1532622

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILLIAMS, SONNY L SR.
5634 ISABEL DR
JACKSONVILLE, FL 32277 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: SONNY WILLIAMS

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: WILLIAMS, SONNY L SR
Address: P.O. BOX 19623
City-St-Zip: JACKSONVILLE, FL 32246 US

Title: VP (X) Delete
Name: GOUGE, MARVIN D
Address: P.O. BOX 19623
City-St-Zip: JACKSONVILLE, FL 32246 US

Title: VP/S (X) Delete
Name: WILLIAMS, ANNA K
Address: P.O. BOX 19623
City-St-Zip: JACKSONVILLE, FL 32246 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: SONNY WILLIAMS

Electronic Signature of Signing Officer or Director

PRES

10/25/2007

Date