

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000015268

Entity Name: WILLIAM SUMNER, INC.

FILED  
Aug 18, 2009  
Secretary of State

## Current Principal Place of Business:

ROSE MARIE RD.  
85264  
YULEE, FL 32097

## New Principal Place of Business:

## Current Mailing Address:

ROSE MARIE RD.  
85264  
YULEE, FL 32097

## New Mailing Address:

FEI Number: 20-2239200

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ROGGIE & PIERCE PA  
PO BOX 2202  
STATE RD A1A  
YULEE, FL 32097 US

## Name and Address of New Registered Agent:

ROGGIE & PIERCE PA  
463243  
STATE RD A1A  
YULEE, FL 32097 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:

08/18/2009

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: SUMNER, WILLIAM  
Address: 85264 ROSE MARIE RD.  
City-St-Zip: YULEE, FL 32097

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: WILLIAM SUMNER

P

08/18/2009

Electronic Signature of Signing Officer or Director

Date