

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000117577

FILED  
Mar 04, 2011  
Secretary of State

**Entity Name:** W. M. DILLARD & ASSOCIATES OF FLORIDA, INC.

**Current Principal Place of Business:**

8048 NORTHCOURT RD.  
SUITE 100  
HOUSTON, TX 77040

**New Principal Place of Business:**

**Current Mailing Address:**

8048 NORTHCOURT RD.  
SUITE 100  
HOUSTON, TX 77040

**New Mailing Address:**

**FEI Number:** 20-3353370

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CHECK MATE LICENSING SERVICE  
4411 BEE RIDGE ROAD  
#257  
SARASOTA, FL 34233 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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: DILLARD, WALLACE M  
Address: 8505 WYNDHAM COURT  
City-St-Zip: HOUSTON, TX 77040

Title: VPST  
Name: DILLARD, MARIE  
Address: 8505 WYNDHAM COURT  
City-St-Zip: HOUSTON, TX 77040

I hereby 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 all other like empowered.

SIGNATURE: WALLACE DILLARD

P

03/04/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date