

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000118044

**FILED**  
**Apr 29, 2011**  
**Secretary of State**

**Entity Name:** MARSHALL D. WILLIAMS SR. INC.

**Current Principal Place of Business:**

2411 TUPELO TERRACE  
TALLAHASSEE, FL 32303

**New Principal Place of Business:**

1517 LEVY AVENUE  
#140  
TALLAHASSEE, FL 32310

**Current Mailing Address:**

2411 TUPELO TERRACE  
TALLAHASSEE, FL 32303

**New Mailing Address:**

1517 LEVY AVENUE  
#140  
TALLAHASSEE, FL 32310

FEI Number: 76-0799900

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

WILLIAMS, MARSHALL D SR.  
2411 TUPELO TERRACE  
TALLAHASSEE, FL 32303 US

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

WILLIAMS, MARSHALL D SR.  
1517 LEVY AVENUE  
#140  
TALLAHASSEE, FL 32310 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: MARSHALL WILLIAMS

04/29/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: WILLIAMS, MARSHALL D SR.  
Address: 1517 LEVY AVENUE  
City-St-Zip: TALLAHASSEE, FL 32310

Title: T  
Name: WOODY, JUSTIN  
Address: 9740 VETERANS MEMORIAL  
City-St-Zip: MICCOSUKEE, FL 32309

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: MARSHALL WILLIAMS

P

04/29/2011

Electronic Signature of Signing Officer or Director

Date