

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000092121

Entity Name: WILLIAMS CONTRACTORS, INC.

FILED
May 14, 2009
Secretary of State

Current Principal Place of Business:

1235 WHISPERING PINES RD.
JACKSONVILLE, FL 32259 US

New Principal Place of Business:

Current Mailing Address:

445 STATE ROAD 13
#218
JACKSONVILLE, FL 32259 US

New Mailing Address:

FEI Number: 26-3524848 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

WILLIAMS, ANGELA J
1235 WHISPERING PINES RD.
JACKSONVILLE, FL 32259 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

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, ANGELA J
Address: 1235 WHISPERING PINES RD.
City-St-Zip: JACKSONVILLE, FL 32259 US

Title: VP () Delete
Name: WILLIAMS, CECIL D JR.
Address: 1235 WHISPERING PINES RD.
City-St-Zip: JACKSONVILLE, FL 32259 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: COO (X) Change () Addition
Name: WILLIAMS, CECIL D JR.
Address: 1235 WHISPERING PINES RD.
City-St-Zip: JACKSONVILLE, FL 32259 US

Title: CFO () Change (X) Addition
Name: MCCALL, MYRON E
Address: 10664 QUAIL RIDGE DR
City-St-Zip: PONTE VEDRA, FL 32081 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: CECIL D. WILLIAMS JR

P

05/14/2009

Electronic Signature of Signing Officer or Director

_____ Date