

# **2013 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P10000038706

**FILED**  
**Oct 13, 2013**  
**Secretary of State**

**Entity Name:** WILLIAMS TRIAL GROUP, P.A.

**Current Principal Place of Business:**

219 LIME AVE.  
ORLANDO, FL 32805 US

**New Principal Place of Business:**

2295 SOUTH HIAWASSEE ROAD  
SUITE 318  
ORLANDO, FL 32835 US

**Current Mailing Address:**

P.O. BOX 2921  
ORLANDO, FL 32802

**New Mailing Address:**

2295 SOUTH HIAWASSEE ROAD  
SUITE 318  
ORLANDO, FL 32835 US

**FEI Number:** 27-2520374

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

WILLIAMS, CAMARA A ESQ.  
6506A NEW GOLDENROD ROAD  
ORLANDO, FL 32822 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:** CAMARA A. WILLIAMS

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** WILLIAMS, CAMARA A ESQ.  
**Address:** 6506 NEW GOLDENROD RD  
**City-St-Zip:** ORLANDO, FL 32822 US

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:** CAMARA A. WILLIAMS

P

10/13/2013

Electronic Signature of Signing Officer or Director

Date