

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P93000010432

Entity Name: A-B WILLIAMS, INC.

**FILED**  
**Mar 15, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

506 N MLK AVE  
CLEARWATER, FL 33755 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 2877  
CLEARWATER, FL 33757 US

**New Mailing Address:**

FEI Number: 59-3191087

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

WILLIAMS, BRUCE  
506 N MLK AVE  
CLEARWATER, FL 33755 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: PSD  
Name: WILLIAMS, BRUCE  
Address: 506 N MLK AVE  
City-St-Zip: CLEARWATER, FL 33755

Title: VTD  
Name: WILLIAMS, KENNETH A  
Address: 506 N MLK AVE  
City-St-Zip: CLEARWATER, FL 33757

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: BRUCE WILLIAMS

PRES

03/15/2011

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

\_\_\_\_\_  
Date