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Secretary of State

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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000058679

1. Corporation Name
MARY ANNE WILLIAMS, P.A.

Principal Place of Business
3712 CARROLLBROOK ROAD
TAMPA FL 33618

Mailing Address
3712 CARROLLBROOK ROAD
TAMPA FL 33618

DO NOT WRITE IN THIS SPACE.

3. Date incorporated or Qualified
08/16/1993

2. Principal Place of Business
21 3053 BRAELOCH CIR EAST
Suite, Apt. #, etc.

2a. Mailing Address
27 3053 BRAELOCH CIR EAST
Suite, Apt. #, etc.

4. FEI Number
59-3198264
Applied For
Not Applicable

22 City & State
23 CLEARWATER, FL

27 City & State
28 CLEARWATER, FL

5. Certificate of Status Desired \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

24 33761 25 USA
29 33761 30 USA

8. This corporation owes the current year Intangible Personal Property Tax. Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WILLIAMS, MARY A
3712 CARROLLBROOK ROAD
TAMPA FL 33618

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
3053 BRAELOCH CIRCLE EAST
83
84 City
CLEARWATER FL
85 Zip Code
33761

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: *Mary Anne Williams* DATE: 1-15-99
(NOTE: Registered Agent signature required when reinstating)

Table with 12 columns: TITLE, NAME, STREET ADDRESS, CITY-ST-ZIP, and a DELETED checkbox. Row 1: WILLIAMS, MARY A, 3712 CARROLLBROOK ROAD, TAMPA FL 33618.

Table with 13 columns: 1.1 TITLE, 1.2 NAME, 1.3 STREET ADDRESS, 1.4 CITY-ST-ZIP, and checkboxes for Change/Addition. Row 1: 3053 BRAELOCH CIRCLE EAST, CLEARWATER, FL 33761.

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Mary Anne Williams* DATE: 1-15-99
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (11/98)