

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 11, 2008 8:00 am
Secretary of State

08-11-2008 90121 023 ***150.00

DOCUMENT # P94000070634

1. Entity Name
WM. ARTHUR AND ASSOCIATES, INC.



Principal Place of Business
800 DOUGLAS ROAD
SUITE 303
CORAL GABLES, FL 33134 US

Mailing Address
800 DOUGLAS ROAD
SUITE 303
CORAL GABLES, FL 33134 US

2. Principal Place of Business - No P.O. Box #
927 HARDEE RD.

3. Mailing Address
P.O. Box 14,2116

Suite, Apt. #, etc.

City & State
CORAL GABLES, FL.

City & State
CORAL GABLES, FL.

Zip
33146

Country
US

Zip
33114.2116

Country
US



08082008 Chg-P CR2E034 (12/06)

4. FEI Number
65-0527301

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ARTHUR, BRUCE A
800 DOUGLAS RD
SUITE 303
CORAL GABLES, FL 33134

7. Name and Address of New Registered Agent

Name
ARTHUR, BRUCE A.

Street Address (P.O. Box Number is Not Acceptable)
11712 SW 81ST ROAD

City
VILLAGE OF PINECREST FL

Zip Code
33156

I, the above named entity, submit this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

10 JULY 08

FILE NOW!!! FEE IS \$550.00
Due by September 12, 2008

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Delete
P	ARTHUR, WILLIAM F	1265 S. ALHAMBRA CIRCLE, UNIT B	CORAL GABLES, FL 33146	<input type="checkbox"/>
V	ARTHUR, ALISON M	1265 S. ALHAMBRA CIRCLE, UNIT B	CORAL GABLES, FL 33146	<input type="checkbox"/>
D	ARTHUR, WILLIAM H	800 DOUGLAS RD, #303	CORAL GABLES, FL 33134	<input checked="" type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
P	ARTHUR, WILLIAM F.	11712 SW 81ST ROAD	PINECREST, FL. 33156	<input checked="" type="checkbox"/>	<input type="checkbox"/>
V	ARTHUR, ALISON M.	7273 DENMARK DR.	DENVER, NC. 28037	<input checked="" type="checkbox"/>	<input type="checkbox"/>
D	ARTHUR, BRUCE A.	11712 SW 81ST RD.	PINECREST, FL. 33156	<input type="checkbox"/>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with an other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

WM. F. ARTHUR PRES.

Date

10 JULY 08

Daytime Phone #

(305) 443-3100

ATTACHMENT



wmarthur

40113128

PG4000070634

10July08

*Division of Corporations
P.O. Box 1500
Tallahassee, Fl. 32302-1500*

RE: \$550.00 annual fee

Dear Div. of Corporations:

*My father and director of Wm. Arthur and Associates, Inc. passed away.
We moved our offices and I did not receive a notice. I have enclosed
\$150.00.*

Thank you,

A handwritten signature in cursive script, appearing to read 'Wm F Arthur', followed by a long horizontal line.

*Wm. F. Arthur-Architect/ Builder
AR0012074*