FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000037663 (8)

DANIEL F. WILLIAMSON INC.

Principal Plac	e of Business	Mailing Address					188
5130 BROAD ST PO BOX 10238 BROOKSVILLE FL 34601 BROOKSVILLE FL 34603 US						DO NOT WRITE IN 3. Date Incorporated or Qualified	THIS SPACE
						05/11/1995	
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number	Applied For
21		26				59-3368737	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Regulred	
		City & State	y & State		6. Election Campaign Financing	\$5.00 May Be	
23		28				Trust Fund Contribution	
Zip	Country	Zip	Cour	ntry		8. This corporation owes or has paid to	
24	25	[29]	30			Personal Property Tax due June 30.	☑ Yes □ No
	9. Name and Address of Curren	t Registered Agent		81 Na		10. Name and Address of New Regist	ered Agent
	LIAMSON, DANIEL F		İ	oi iva	ne		
	80 Broad St Ooksville Fl 34601			82 Stre	et Addre	ess (P.O. Box Number is Not Acceptable)	
Dn.	OOMOVILLE FL 34001		ŀ	83	····		
			ŀ	B4 City			
			1	- 1			FL 85 Zip Code
I ™ office or r	egistered agent, or both, in the State in familiar with, and accept the obliga	ol Florida. Such change was ations of, Section 607.05 <mark>05,</mark> Fl	authorized orida Stati	by the lates.	corporatio	oration submits this statement for the purp on's board of directors. I hereby accept the distribution of the directors of the distribution of the directors of	e appointment as registered
12.	OFFICERS AND	DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICER	
TITLE	D	☐ DELETE	1.1 TIT				Change Addition
HAME	WILLIAMSON, DANIEL F		1.2 NA		l		
STREET ADDRESS	16149 MELBOURNE ST SPRING HILL FL 34609			REET ADDRE	SS		
CITY-ST-ZIP			1.4 CIT 2.1 TIT	Y-ST-ZIP			Change Addition
NAME	WILLIAMSON, DANIEL		2.1 III 2.2 NA				CHANGE LANGUION
STREET ADDRESS	16149 MELBOURNE STREET			vie Reet adore	ee		
CITY-ST-ZIP	SPRING HILL FL	•		Y-ST-ZIP	55		
TITLE		DELE T E	3.1 TIT				Change Addition
NAME			3.2 NA	ME			
STREET ADDRESS			3.3 ST	REET ADDRE	ss		
CITY-ST-ZIP			3.4. CH	Y-ST-ZIP			
TITLE		☐ DELETE	4.1 Titl	.E			Change Addition
NAME			4. 2 NA	ME			
STREET ADDRESS			4.3 STF	EET ADDRE	ss		
CITY-ST-ZIP		The second		Y-ST-ZIP			
TITLE		☐ DELETE	5.1 TITI				Change Addition
NAME			5.2 NAI				
STREET ADDRESS			5.3 STF	EET ADDRE	ss		

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.

6.3 STREET ADDRESS

6.1 TITLE

DELETE

CIGNATURE:

CITY-ST-ZIP TITLE

NAME STREET ADDRESS

March Laboration

Daniel Flyilliamson 41-27-98 352-168-900

Addition

FILED

May 07 1998 8:00am

Secretary of State

400/1034 (19 CD) at allet 00/11 00/11 00/11 00/14 00/10 10/10 10/10 10/10 01/16 01/16 01/16 01/16 01/16 01/16