

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000072675 (8)

1. Corporation Name

J.T. WILLIAMS PROPERTIES, INC.



Principal Place of Business

**2004 42ND STREET WEST
BRADENTON FL 34205**

Mailing Address

**2004 42ND STREET WEST
BRADENTON FL 34205**

3. Date Incorporated or Qualified
09/18/1995

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25 29 30

4. FEI Number

65-0614874

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

**STEIN, ALAN
2915 39TH STREET EAST
BRADENTON FL 34208**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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

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

(NOTE: Registered Agent's signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP

PD WILLIAMS, JAMES TROY
2915 39TH STREET EAST
BRADENTON FL 34205

TITLE NAME STREET ADDRESS CITY - ST - ZIP

VD WILLIAMS, ALYCE JEANETTE
2915 39TH STREET EAST
BRADENTON FL 34205

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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1 1 TITLE 12 NAME 13 STREET ADDRESS 14 CITY - ST - ZIP

2 1 TITLE 22 NAME 23 STREET ADDRESS 24 CITY - ST - ZIP

3 1 TITLE 32 NAME 33 STREET ADDRESS 34 CITY - ST - ZIP

4 1 TITLE 42 NAME 43 STREET ADDRESS 44 CITY - ST - ZIP

5 1 TITLE 52 NAME 53 STREET ADDRESS 54 CITY - ST - ZIP

6 1 TITLE 62 NAME 63 STREET ADDRESS 64 CITY - ST - ZIP

7 1 TITLE 72 NAME 73 STREET ADDRESS 74 CITY - ST - ZIP

8 1 TITLE 82 NAME 83 STREET ADDRESS 84 CITY - ST - ZIP

9 1 TITLE 92 NAME 93 STREET ADDRESS 94 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE:

Alyce Jeanette Williams
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11/25/96 941-748-1320
Date Daytime Phone #

CR2E034 (12/95)