

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000000121

FILED
Apr 23, 2009
Secretary of State

Entity Name: WILLIAM S. WILLIAMS, P.A.

Current Principal Place of Business:

10TH FLOOR NORTHBRIDGE CENTRE
515 NORTH FLORIDA DRIVE SUITE 1000
W. PALM BEACH, FL 33401

New Principal Place of Business:

515 NORTH FLAGLER DRIVE SUITE 1000
WEST PALM BEACH, FL 33401

Current Mailing Address:

10TH FLOOR NORTHBRIDGE CENTRE
515 NORTH FLORIDA DRIVE SUITE 1000
W. PALM BEACH, FL 33401

New Mailing Address:

515 NORTH FLAGLER DRIVE SUITE 1000
WEST PALM BEACH, FL 33401

FEI Number: 65-0635974

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILLIAMS, WILLIAM S
10TH FLOOR NORTHBRIDGE CENTRE
515 NORTH FLORIDA DRIVE
W. PALM BEACH, FL 33401 US

Name and Address of New Registered Agent:

WILLIAMS, WILLIAM S
515 NORTH FLAGLER DRIVE SUITE 1000
WEST PALM BEACH, FL 33401 US

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

04/23/2009

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: WILLIAMS, WILLIAM S
Address: 515 N. FLAGLER DRIVE, 10TH FLOOR
City-St-Zip: W. PALM BEACH, FL 33401

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: WILLIAM S. WILLIAMS

P

04/23/2009

Electronic Signature of Signing Officer or Director

Date