2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P96000024998

1. Entity Name

JEFFERY W. WILLIAMS, P.A., CHARTERED



FILED
Mar 01, 2006 08:00 AN
Secretary of State

Principal Place of Business

Mailing Address

11741 GOLDEN VALLEY DRIVE NEW PORT RICHEY, FL 34654 11741 GOLDEN VALLEY DRIVE NEW PORT RICHEY, FL 34654

DO NOT WRITE IN THIS SPACE

5. Name and Address of Current Registered Agent

WILLIAMS, JEFFERY W 11741 GOLDEN VALLEY DRIVE NEW PORT RICHEY, FL 34654



02212006

No Chg-P

CR2E034 (11/05)

4. FEI Number 59-3367611

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

NEW PORT RICHET, PL 34004			IN THIS SPACE			
	tions of registered agent.	urpose of changing its registered	office or r	egistered agent, or b	oth, in the State of Fiorida. I am familiar with, and acce	ŗ
SIGNATIONE.	Signature, typed or printed name of registered agent and life if	applicable. (NOTE: Registered Ag	ent signature	e required when reinstating)	DATE	
Fil. After M	E NOW!!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550.00	Election Campaign Financir Trust Fund Contribution.	ng 🗆	\$5.00 May Be Added to Fees		
10. Title Name Street address	OFFICERS AND DIRECT PSTD WILLIAMS, JEFFERY W 11741 GOLDEN VALLEY DRIVE	TORS		-		
CITY-ST-ZIP ITTLE NAME STREET ADDRESS CITY-ST-ZIP	NEW PORT RICHEY, FL 34654				Unnno0452247 N3/11/N6-80018-023 150.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		:		IN	THIS SPACE	
TITLE Name Street Address City-St-Zip		:	·			
TITLE Name Street Address Caty-St-ZIP			•			

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 of 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 all other like empowered.

SIGNATURE:

Fra. Williams

2/20/06 727-379-0769