2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000104290

FILED Apr 26, 2006 Secretary of State

Entity Name: GARY R. WILLIAMS, INC. **Current Principal Place of Business: New Principal Place of Business:** 5485-6 LEE STREET LEHIGH ACRES, FL 33971 **Current Mailing Address: New Mailing Address:** 5485-6 LEE STREET LEHIGH ACRES, FL 33971 FEI Number: 65-0733930 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: WILLIAMS, GARY R 5485-6 LEE STREET LEHIGH ACRES, FL 33971 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 Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: **PVST** () Delete Title: **PVST** (X) Change () Addition WILLIAMS, GARY R Name:

Address:

City-St-Zip:

Name: WILLIAMS, GARY R

11061 HARBOUR YACHT CT. #202 Address:

City-St-Zip: FORT MYERS, FL 33908

Title: VΡ () Delete BUTLER, RAYMOND A Name:

18291 PINE NUT COURT Address: LEHIGH ACRES, FL 33936 City-St-Zip:

Title: () Change () Addition

16056 WATERLEAF LANE

FORT MYERS, FL 33908

Name: Address: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: GARY R. WILLIAMS **PVST** 04/26/2006