

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2004 8:00 am
Secretary of State

04-28-2004 90301 043 ***150.00

DOCUMENT # P98000021941

1. Entity Name
KENT WILLIAMS, INC.



Principal Place of Business
1605 MAIN STREET, STE. 1001
SARASOTA, FL 34236

Mailing Address
1605 MAIN STREET, STE. 1001
SARASOTA, FL 34236

2. Principal Place of Business
1570 6TH STREET
Suite, Apt. #, etc.

3. Mailing Address
SAME
Suite, Apt. #, etc.

City & State
SARASOTA FL
Zip
34236
Country
SARASOTA

City & State
City
Zip
Country

01152004 Chg-P CR2E034 (10/03)

4. FEI Number
59-3497918
Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required



6. Name and Address of Current Registered Agent

GOLDSMITH, STANLEY A
1605 MAIN STREET, STE. 1001
SARASOTA, FL 34236

7. Name and Address of New Registered Agent

Name
MITCHELL K. WILLIAMS
Street Address (P.O. Box Number is Not Acceptable)
1570 6TH STREET
City
SARASOTA FL Zip Code
34236

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Kent Williams*
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

4/16/04
DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPAS WILLIAMS, M. KENT 1570 6TH ST. SARASOTA, FL 34236	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVPS WILLIAMS, MELISSA A 1570 6TH ST. SARASOTA, FL 34236	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AT WILLIAMS, KENT M 1570 6TH ST. SARASOTA, FL 34238	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T WILLIAMS, MELISSA A 1570 6TH ST. SARASOTA, FL 34236	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	1570 6TH STREET	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or 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:

Kent Williams
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/16/04
Date

(941) 955-6279
Telephone #