

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000003069

Entity Name: WILLIAM JAMES, INC.

FILED  
Apr 28, 2005  
Secretary of State

## Current Principal Place of Business:

1000 WEST BEACON ROAD  
LAKELAND, FL 33803

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 434  
LAKELAND, FL 338020434

## New Mailing Address:

FEI Number: 59-3558927

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

TURBEVILLE, HUGH  
16 LAKE HOLLINGSWORTH DRIVE  
LAKELAND, FL 33803 US

## Name and Address of New Registered Agent:

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:

Title: PTD ( ) Delete  
Name: STANLEY, BOB  
Address: 1000 WEST BEACON ROAD  
City-St-Zip: LAKELAND, FL 33803

Title: VPSD ( ) Delete  
Name: TURBEVILLE, HUGH  
Address: 16 LAKE HOLLINGSWORTH DRIVE  
City-St-Zip: LAKELAND, FL 33803

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: ( ) Change ( ) Addition  
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 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 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: HUGH TURBEVILLE

VPSD

04/28/2005

Electronic Signature of Signing Officer or Director

Date