## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

## Apr 26, 2004 08:00 AM Secretary of State DOCUMENT # P99000073122 ~ 1. Entity Name WILLIAMS, INC. Principal Place of Business Mailing Address 2826 DEERBROOK DRIVE 2826 DEERBROOK DRIVE LAKELAND, FL 33811 LAKELAND, FL 33811 No Chg-P 03292004 CR2E034 (10/03) AND MOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3591217 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 8. Name and Address of Current Registered Agent WILLIAMS, VROJAM F 2826 DEERBOOK DRIVE LAKELAND, FL 33811 DO NOT WRITE IN THIS SPACE 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. Signature, typed or printed hame of registered agent and title if applicable, (NOTE, Registered Agent planature registed when religizating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2004 Fee will be \$550.00 10. OFFICERS AND DIRECTORS TITLE NAME WILLIAMS, WILLIAM F 2826 DEERBROOK DRIVE STREET ADDRESS U00000129596 04/26/04-80084-025 150:00 CITY-ST-ZIP LAKELAND, FL 33811 TITLE NAME WILLIAMS, DEBRA C ESPET ADDRESS 2826 DEERBROOK DRIVE Žr-ST-ZIP LAKELAND, FL 33811 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE N THE SUICE NAME STREET ADDRESS CITY - ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ACCRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1), 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 afformation.

FILED