

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S00168

FILED
Apr 25, 2006
Secretary of State

Entity Name: WILLIAMS SERVICE, INC.

Current Principal Place of Business:

162 COMMERCIAL DRIVE
PENSACOLA, FL 32533

New Principal Place of Business:

162 COMMERCIAL DRIVE
CANTONMENT, FL 32533

Current Mailing Address:

162 COMMERCIAL DRIVE
CANTONMENT, FL 32533 US

New Mailing Address:

FEI Number: 63-0513765 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TURNBOW, R. WOOD
162 COMMERCIAL DRIVE
PENSACOLA, FL 32533 US

Name and Address of New Registered Agent:

TURNBOW, R. WOOD
162 COMMERCIAL DRIVE
CANTONMENT, FL 32533 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

04/25/2006

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: WILLIAMS, GAIL B
Address: 404 POINCIANA DIRVE
City-St-Zip: GULF BREEZE, FL

Title: D () Delete
Name: WILLIAMS, ROBERT R
Address: 404 POINCIANA DIRVE
City-St-Zip: GULF BREEZE, FL

Title: CFO () Delete
Name: TURNBOW, R. WOOD
Address: 3650 OLD SHELL RD
City-St-Zip: MOBILE, FL 36608

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: WILLIAMS, GAIL B
Address: 1902 E STRONG STREET
City-St-Zip: PENSACOLA, FL 32501

Title: D (X) Change () Addition
Name: WILLIAMS, ROBERT R
Address: 1902 E STRONG STREET
City-St-Zip: PENSACOLA, FL 32501

Title: CFO (X) Change () Addition
Name: TURNBOW, R. WOOD
Address: 812 DOWNTOWNER BLVD
City-St-Zip: MOBILE, FL 36609

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: ROBERT R WILLIAMS

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04/25/2006

Electronic Signature of Signing Officer or Director

Date