

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# S09433

**FILED**  
**Mar 21, 2011**  
**Secretary of State**

**Entity Name:** WILLIAMS WATER TREATMENT, INC.

**Current Principal Place of Business:**

1 LASSITER ST  
AVON PARK, FL 33825

**New Principal Place of Business:**

**Current Mailing Address:**

1 LASSITER ST  
AVON PARK, FL 33825

**New Mailing Address:**

**FEI Number:** 59-3039445

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

WILLIAMS, HENRY C.  
1 LASSITER STREET  
AVON PARK, FL 33825 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

**OFFICERS AND DIRECTORS:**

Title: D  
Name: WILLIAMS, HENRY C.  
Address: 1503 BERWYN AVE.  
City-St-Zip: AVON PARK, FL

Title: DST  
Name: WILLIAMS, IRENE R.  
Address: 1503 BERWYN AVE.  
City-St-Zip: AVON PARK, FL

Title: PD  
Name: WILLIAMS, WILLIAM C.  
Address: 33 EAST PLEASANT ST  
City-St-Zip: AVON PARK, FL 33825

I hereby 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 all other like empowered.

SIGNATURE: HENRY C WILLIAMS

D

03/21/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date