## 2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

#### DOCUMENT# N18446

Entity Name: FRANK WILLIAMS FOUNDATION, INC.

## **Current Principal Place of Business:**

% FRANK M. WILLIAMS MD. 1211 REYNOLDS AVENUE CLEARWATER, FL 33756

# **Current Mailing Address:**

% FRANK M. WILLIAMS MD. 1211 REYNOLDS AVENUE CLEARWATER, FL 33756 US

# FEI Number: 59-2786891

# Name and Address of Current Registered Agent:

WILLIAMS, FRANK M MD 1211 REYNOLDS AVE CLEARWATER, FL 33756 US Certificate of Status Desired: Yes

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

# **Officer/Director Detail :**

Title	DAS	Title	D
Name	WILLIAMS, FRANK M	Name	WILLIAMS, JACQUELINE
Address	1211 REYNOLDS AVENUE	Address	1211 REYNOLDS AVE.
City-State-Zip:	CLEARWATER FL 33756	City-State-Zip:	CLEARWATER FL 33756
Title	D	Title	DAS
Title Name	D BALDWYN, RUTH E	Title Name	DAS WILLIAMS, FRANK M
	BALDWYN, RUTH E % FRANK M. WILLIAMS MD.		
Name	BALDWYN, RUTH E	Name	WILLIAMS, FRANK M

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

#### SIGNATURE: FRANK M WILLIAMS

DAS

Date

Electronic Signature of Signing Officer/Director Detail