2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 304805

Entity Name: WM. B. CRESSE, INC.

Current Principal Place of Business:

117 COMMERCE AVE LAKE PLACID, FL 33852

Current Mailing Address:

PO BOX 906 LAKE PLACID, FL 33862

FEI Number: 59-1141059

Name and Address of Current Registered Agent:

CRESSE, WILLIAM M. 117 COMMERCE AVE LAKE PLACID, FL 33852 US Certificate of Status Desired: No

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 | VD | Title | PD |
|-----------------|-----------------------------------|-----------------|----------------------|
| Name | CRESSE, EVELYN F | Name | CRESSE, WILLIAM M. |
| Address | PO BOX 906 | Address | PO BOX 906 |
| City-State-Zip: | LAKE PLACID FL 33862 | City-State-Zip: | LAKE PLACID FL 33862 |
| | | | |
| Title | CORRESPONDING SECRETARY | | |
| | | | |
| Name | CRESSE, BRIAN | | |
| Name Address | CRESSE, BRIAN 117 COMMERCE AVE | | |
| | 117 COMMERCE AVE | | |

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: EVELYN FEARNS-CRESSE

VICE PRESIDENT

01/25/2021

Date

Electronic Signature of Signing Officer/Director Detail

FILED Jan 25, 2021 Secretary of State 4496343817CC