

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 312802

**Entity Name:** WILLIAM H. GILMORE, INC.

**Current Principal Place of Business:**

CLEARWATER MUNICIPAL MARINA  
25 CAUSEWAY BLVD SLIP 51  
CLEARWATER, FL 33767

**Current Mailing Address:**

P.O. BOX 3008  
CLEARWATER, FL 33767

**FEI Number:** 59-1165295

**Certificate of Status Desired:** No

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

HAGGERT, SANFORD A  
CLEARWATER MUNICIPAL MARINA  
25 CAUSEWAY BLVD SLIP #51  
CLEARWATER, FL 33767 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

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title STD  
Name HAGGERT, ROSE A  
Address 1613 GRAY BARK DRIVE  
City-State-Zip: OLDSMAR FL 34677

Title PD  
Name HAGGERT, SANFORD A  
Address 1613 GRAY BARK DRIVE  
City-State-Zip: OLDSMAR FL 34677

Title VPD  
Name HAGGERT, CHAD  
Address 384 TAVERNIER CIR  
City-State-Zip: OLDSMAR FL 34677

*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:** CHAD HAGGERT

VP

01/13/2015

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date