

2021 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, ROSEANN
Address 18134 POWWERLINE RD
City-State-Zip: DADE CITY FL 33523Title PD
Name HAGGERT, SANFORD A
Address 18134 POWERLINE RD
City-State-Zip: DADE CITY FL 33523Title VPD
Name HAGGERT, CHAD
Address 384 TAVERNIER CIR
City-State-Zip: OLDSMAR FL 34677Title SD
Name HAGGERT, TRACIE
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

VICE PRESIDENT

01/11/2021

Electronic Signature of Signing Officer/Director Detail_____
Date