

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 330289

Entity Name: WILLIAMS ELECTRIC CO., INC.**Current Principal Place of Business:**695 DENTON BLVD.
FORT WALTON BEACH, FL 32547-2150**Current Mailing Address:**695 DENTON BLVD.
FORT WALTON BEACH, FL 32547-2150**FEI Number:** 59-1213567**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**NATIONAL CORPORATE RESEARCH, LTD., INC.
155 OFFICE PLAZA DR
TALLAHASSEE, FL 32301 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	PD
Name	WILLIAMS,HARVEY L
Address	695 DENTON BLVD.
City-State-Zip:	FT WALTON BEACH FL 32547

Title	TD
Name	WILLIAMS,ROBERT H
Address	1154 FROST LANE
City-State-Zip:	LAUREL HILL FL 32567

Title	VD
Name	WILLIAMS, JAMES R
Address	149 RED BAY CT
City-State-Zip:	SANTA ROSA BEACH FL 32459

Title	SD
Name	CONNERLEY, W K
Address	4932 HICKORY SHORES BLVD
City-State-Zip:	GULF BREEZE FL 32563

Title	VP
Name	RUCKER, DANIEL WRAY
Address	695 DENTON BLVD.
City-State-Zip:	FORT WALTON BEACH FL 32547-2150

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: W KIM CONNERLEY**SECRETARY****04/27/2015**_____
Electronic Signature of Signing Officer/Director Detail_____
Date