

**2025 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P03000117389

**Entity Name:** WILLIAMS NURSERY, INC.

**Current Principal Place of Business:**

1411 FOX RUN DR  
TARPON SPRINGS, FL 34689

**Current Mailing Address:**

P.O.BOX 218  
TARPON SPRINGS, FL 34688

**FEI Number:** 20-0336855

**Certificate of Status Desired:** No

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

WILLIAMS, STEVEN  
1411 FOX RUN DR  
TARPON SPRINGS, FL 34689 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:** STEVEN WILLIAMS

04/10/2025

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P/D  
Name WILLIAMS, STEVEN  
Address 1411 FOX RUN DR.  
City-State-Zip: TARPON SPRINGS FL 34689

Title T/D  
Name WILLIAMS, STEVEN  
Address 1411 FOX RUN DR  
City-State-Zip: TARPON SPRINGS FL 34689

*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:** STEVEN WILLIAMS

CEO

04/10/2025

Electronic Signature of Signing Officer/Director Detail

Date