

**2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F06000007052

**Entity Name:** WILLIAMSBURG RESORTS, INC.

**Current Principal Place of Business:**

4870 LONGHILL RD  
WILLIAMSBURG, VA 23188

**Current Mailing Address:**

2626 E. OAKLAND PARK BLVD.  
FT. LAUDERDALE, FL 33306 US

**FEI Number:** 54-1595451

**Certificate of Status Desired:** No

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

FOSTER, REBECCA A  
2626 E. OAKLAND PARK BLVD.  
FT. LAUDERDALE, FL 33306 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            PRESIDENT, DIRECTOR  
Name            FOSTER, REBECCA A  
Address        2626 E. OAKLAND PARK BLVD.  
City-State-Zip: FT. LAUDERDALE FL 33306

Title            VP  
Name            ARCHARD, TAMMY  
Address        2626 E. OAKLAND PARK BLVD.  
City-State-Zip: FT. LAUDERDALE FL 33306

Title            VP  
Name            DOCKERY-RUIZ, VICKIE  
Address        2626 E. OAKLAND PARK BLVD.  
City-State-Zip: FT. LAUDERDALE FL 33306

Title            VP, TREASURER  
Name            RAYMOND, MOLLIE  
Address        2626 E. OAKLAND PARK BLVD.  
City-State-Zip: FT. LAUDERDALE FL 33306

Title            SECRETARY, VP  
Name            UTSET, FRANK A  
Address        2626 E. OAKLAND PARK BLVD.  
City-State-Zip: FT. LAUDERDALE FL 33306

*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:** FRANK A UTSET

**VICE PRESIDENT**

**03/26/2021**

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

\_\_\_\_\_  
Date