

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000112827

FILED  
Mar 24, 2009  
Secretary of State

Entity Name: CORE CONSTRUCTION SERVICES, SOUTHEAST, INC.

**Current Principal Place of Business:**

4227 EXCHANGE AVENUE  
NAPLES, FL 341047018

**New Principal Place of Business:**

**Current Mailing Address:**

4227 EXCHANGE AVENUE  
NAPLES, FL 341047018

**New Mailing Address:**

FEI Number: 37-1104244      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

BECKER & POLIAKOFF, P.A.  
6230 UNIVERSITY PARKWAY, SUITE 204  
SARASOTA, FL 34240 US

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

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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: WISEMAN, JOHN P  
Address: 3307 CLARK ROAD, SUITE 201  
City-St-Zip: SARASOTA, FL 342318419

Title: S ( ) Delete  
Name: OLISOVSKY, JESSE C  
Address: 4227 EXCHANGE AVENUE  
City-St-Zip: NAPLES, FL 341047018

Title: VT ( ) Delete  
Name: GURDIAN, ROBERT J  
Address: 4227 EXCHANGE AVENUE  
City-St-Zip: NAPLES, FL 341047018

Title: CD ( ) Delete  
Name: BAUM, WAYNE E  
Address: 866 NORTH MAIN STREET  
City-St-Zip: MORTON, IL 615501602

Title: D ( ) Delete  
Name: BAUM, MELVIN R  
Address: 866 NORTH MAIN STREET  
City-St-Zip: MORTON, IL 615501602

Title: D ( ) Delete  
Name: ROESCHLEY, STEPHEN R  
Address: 866 NORTH MAIN STREET  
City-St-Zip: MORTON, IL 615501602

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: WISEMAN, JOHN P  
Address: 6320 TOWER LANE  
City-St-Zip: SARASOTA, FL 34240

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JOHN P. WISEMAN

P

03/24/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date