

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 09, 2008 08:00 AM
Secretary of State

DOCUMENT # P04000066946

1. Entity Name
WILLIAM WESEMAN CONSTRUCTION, INC.



Principal Place of Business
**1501 N.W. 98TH STREET
GAINESVILLE, FL 32606**

Mailing Address
**1501 N.W. 98TH STREET
GAINESVILLE, FL 32606**



01072008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-1175638

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**WESEMAN, WILLIAM
1501 N.W. 98TH STREET
GAINESVILLE, FL 32606**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

000000777159
01/09/08-80053-011 150.00

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	WESEMAN, WILLIAM
STREET ADDRESS	1501 N.W. 98TH STREET
CITY-ST-ZIP	GAINESVILLE, FL 32606
TITLE	VP
NAME	WESEMAN, GARY
STREET ADDRESS	1501 NW 98 ST
CITY-ST-ZIP	GAINESVILLE, FL 32606
TITLE	VP
NAME	WESEMAN, MICHAEL J
STREET ADDRESS	1501 NW 98TH STREET
CITY-ST-ZIP	GAINESVILLE, FL 32606
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

William Weseman

President

1-8-08

352-3338182

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #