

**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**May 02, 2007 08:00 A**  
**Secretary of State**

**DOCUMENT # P95000096880**

1. Entity Name  
**GLENN WEHAUSEN CONSTRUCTION CLEAN UP, INC.**



Principal Place of Business  
**19500 SKIPPER ROAD  
NORTH FT MYERS, FL 33917**

Mailing Address  
**P O BOX 4247  
NO FT MYERS, FL 33918**



04262007 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>65-0680209</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

**6. Name and Address of Current Registered Agent**

**WEHAUSEN, GLENN  
19500 SKIPPER ROAD  
NORTH FT MYERS, FL 33917**

**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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2007 Fee will be \$550.00**

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

**U00000754324  
05/22/07-80056-018 150.00**

**10. OFFICERS AND DIRECTORS**

TITLE	S
NAME	WEHAUSEN, KENT
STREET ADDRESS	713 SW 46TH ST
CITY-ST-ZIP	CAPE CORAL, FL 33914

TITLE	D
NAME	WEHAUSEN, GLENN
STREET ADDRESS	19500 SKIPPER ROAD
CITY-ST-ZIP	NORTH FT MYERS, FL 33917

TITLE	
NAME	
STREET ADDRESS	
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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:**

*Glenn Wehausen*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**GLENN WEHAUSEN**

**4/30/07**  
Date

Daytime Phone #