

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 18, 2006 8:00 am
Secretary of State

04-18-2006 90084 036 ***150.00

DOCUMENT # P96000014956

1. Entity Name

WESSEL HOME IMPROVEMENT, INC.



Principal Place of Business

315 13TH AVENUE NE
ST. PETERSBURG FL 33701

Mailing Address

315 13TH AVENUE NE
ST. PETERSBURG FL 33701



2. Principal Place of Business

2621 FAIRFIELD AVE. S.

Suite, Apt. #, etc.

ST. PETERSBURG, FL

City & State

33712 USA

Zip

Country

3. Mailing Address

2621 FAIRFIELD AVE. S.

Suite, Apt. #, etc.

ST. PETERSBURG, FL

City & State

33712 USA

Zip

Country

1st MOORE

CR2E034 (10/05)

4. FEI Number

59-3373199

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BERKOFF, DOUGLAS A
2977 ATWOOD DR.
CLEARWATER FL 33761

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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]

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

(NOTE: Registered Agent signature required when constituting)

4/8/06

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2006 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P ☐ Delete
NAME WESSEL, MARK
STREET ADDRESS 4025 1ST AVE. N.
CITY-ST-ZIP ST. PETERSBURG FL

TITLE VP ☐ Delete
NAME WESSEL, JAMES C
STREET ADDRESS 2837 39TH AVE N
CITY-ST-ZIP SAINT PETERSBURG FL 33714

TITLE ST ☐ Delete
NAME WESSEL, PATSEY Y
STREET ADDRESS 315 13TH AVE N.E.
CITY-ST-ZIP SAINT PETERSBURG FL 33701

TITLE VP ☐ Delete
NAME WESSEL, JAMES R
STREET ADDRESS 315 13TH AVE N.E.
CITY-ST-ZIP SAINT PETERSBURG FL 33701

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/11/06

(727) 323-3300

Date

Daytime Phone #