

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S57610 (5)
1. Corporation Name
WESCO SERVICES INC.



Principal Place of Business
**332 WARFIELD AVE.
VENICE FL 34292**

Mailing Address
**332 WARFIELD AVE.
VENICE FL 34292**

2. Principal Place of Business
21 Suite, Apt. #, etc.
22 City & State
23 Zip
24 Country

2a. Mailing Address
26 Suite, Apt. #, etc.
27 City & State
28 Zip
29 Country

3. Date Incorporated or Qualified
05/31/1991

3a. Date of Last Report
03/15/1995

4. FEI Number
65-0270822

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

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

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

**CISERELLA, JOHN C.
332 WARFIELD AVE.
VENICE FL 34292**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code
FL

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and the corporation

Signature typed or printed name of registered agent and the corporation

DATE

12. OFFICERS AND DIRECTORS

TITLE	P	NAME	CISERELLA, JOHN C.	STREET ADDRESS	332 WARFIELD AVE.	CITY-STATE-ZIP	VENICE FL
TITLE	EVP	NAME	CISERELLA, JOHN III	STREET ADDRESS	332 WARFIELD AVE.	CITY-STATE-ZIP	VENICE FL
TITLE	V	NAME	GETZAN, MICHAEL	STREET ADDRESS	332 WARFIELD AVE.	CITY-STATE-ZIP	VENICE FL
TITLE	V	NAME	BROWN, DONALD C	STREET ADDRESS	332 WARFIELD AVE.	CITY-STATE-ZIP	VENICE FL 34292
TITLE	S	NAME	DAVIDSON, LESLIE A.	STREET ADDRESS	332 WARFIELD AVE.	CITY-STATE-ZIP	VENICE FL
TITLE	T	NAME	CISERELLA, JOHN	STREET ADDRESS	332 WARFIELD AVE.	CITY-STATE-ZIP	VENICE FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-STATE-ZIP
2.1 TITLE	2.2 NAME	2.3 STREET ADDRESS	2.4 CITY-STATE-ZIP
3.1 TITLE	3.2 NAME	3.3 STREET ADDRESS	3.4 CITY-STATE-ZIP
4.1 TITLE	4.2 NAME	4.3 STREET ADDRESS	4.4 CITY-STATE-ZIP
5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS	5.4 CITY-STATE-ZIP
6.1 TITLE	6.2 NAME	6.3 STREET ADDRESS	6.4 CITY-STATE-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed or on an attachment with an address.

SIGNATURE: *John C. Cisarella* **JOHN C. CISERELLA 3-4-96 (941) 484-7934**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)