


**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**

**Feb 02, 2007 08:00 AM  
Secretary of State**

<b>DOCUMENT # V56685</b>			
1. Entity Name <b>WISSEL CONSTRUCTION, INC.</b>			
Principal Place of Business <b>6140 NORTH A1A VERO BEACH, FL 32963</b>		Mailing Address <b>6140 NORTH A1A VERO BEACH, FL 32963</b>	
<b>DO NOT WRITE IN THIS SPACE</b>			
		01082007 No Chg-P CR2E034 (11/05)	
		4. FEI Number <b>59-3141994</b>	
		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>			
6. Name and Address of Current Registered Agent  <b>WISSEL, ROY 6140 NORTH A1A VERO BEACH, FL 32963</b>		<b>DO NOT WRITE IN THIS SPACE</b>	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small> DATE _____			
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
		<b>1100000617486 02/07/07-80075-022 150.00</b>	
10. OFFICERS AND DIRECTORS			
TITLE	V		
NAME	AUDETTE, ROBERT		
STREET ADDRESS	6140 N. A-1-A		
CITY-ST-ZIP	VERO BEACH, FL 32963		
TITLE	PST		
NAME	WISSEL, ROY		
STREET ADDRESS	6140 NORTH A1A		
CITY-ST-ZIP	VERO BEACH, FL 32963		
TITLE			
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE			
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
<b>DO NOT WRITE IN THIS SPACE</b>			
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 other like empowered.			
SIGNATURE: <u><i>Roy Wissel</i></u>		1/8/07 772-234-8900	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	