

**2025 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F03463

**Entity Name:** WESTON TRAWICK, INC.

**Current Principal Place of Business:**

5392 TOWER RD.  
TALLAHASSEE, FL 32303

**Current Mailing Address:**

5392 TOWER RD.  
TALLAHASSEE, FL 32303

**FEI Number:** 59-2029217

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

TRAWICK, JAMES CII  
5392 TOWER RD.  
TALLAHASSEE, FL 32303 US

*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.*

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title P  
Name TRAWICK, JAMES CII  
Address 5392 TOWER RD.  
City-State-Zip: TALLAHASSEE FL 32303

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE:** JAMES CURTIS TRAWICK, II

**PRESIDENT**

**02/06/2025**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date