

2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M77455

Entity Name: CAUSSEAU, HEWETT, & WALPOLE, INC.

Current Principal Place of Business:

11801 RESEARCH DR
ALACHUA, FL 32615

Current Mailing Address:

11801 RESEARCH DR
ALACHUA, FL 32615 US

FEI Number: 59-2883104

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

HOWARD, JOHN
622 SW 23RD ST
GAINESVILLE, FL 32601 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 PRESIDENT, SECRETARY
Name WALPOLE, ROBERT J
Address 7524 SW 116TH TERRACE
City-State-Zip: GAINESVILLE FL 32608

Title VP
Name HEWETT, KEVIN W
Address 13543 NW 230TH STREET
City-State-Zip: HIGH SPRINGS FL 32643

Title VP
Name DEDENBACH, GERARD R
Address 2820 NW 10TH PLACE
City-State-Zip: GAINESVILLE FL 32605

Title VP
Name BOLDUC, ELROY JOSEPH III
Address 1510 NW 30TH STREET
City-State-Zip: GAINESVILLE FL 32606

Title VP, OF FINANCE
Name HOWARD, JOHN PAUL
Address 622 SW 23RD PL
City-State-Zip: GAINESVILLE FL 32601

Title VP, OF ENGINEERING
Name YOUNG, DANIEL HARVEY
Address 30451 CARTHUSIAN PLACE
City-State-Zip: MT. DORA FL 32757

Title VP, OF SURVEYING
Name HICKMAN, AARON
Address 8105 NW 184TH DR
City-State-Zip: ALACHUA FL 32615

Title VP
Name DAGOSTINO, DAVID S
Address 10981 BONITA BEACH ROAD SE
City-State-Zip: BONITA SPRINGS FL 34135

Continues on page 2

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: JOHN HOWARD

VICE PRESIDENT

01/06/2023

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name HALL, LAURIE F.
Address 11801 RESEARCH DR
City-State-Zip: ALACHUA FL 32615

Title DIRECTOR
Name CAGGIANO, ANTHONY V. JR.
Address 11801 RESEARCH DR
City-State-Zip: ALACHUA FL 32615