

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# V58182

**Entity Name:** TOM WESSEL CONSTRUCTION CORP.

**Current Principal Place of Business:**

4940 LAKEWOOD RANCH BLVD.  
SUITE 110  
SARASOTA, FL 34240

**Current Mailing Address:**

4940 LAKEWOOD RANCH BLVD.  
SUITE 110  
SARASOTA, FL 34240 US

**FEI Number:** 65-0351709

**Certificate of Status Desired:** No

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

WESSEL, THOMAS J.  
2200 BERN CREEK LOOP  
SARASOTA, FL 34240 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	DPT
Name	WESSEL, THOMAS J.
Address	2200 BERN CREEK LOOP
City-State-Zip:	SARASOTA FL 34240
Title	VP
Name	RICE, MICHAEL A
Address	4940 LAKEWOOD RANCH BLVD. SUITE 110
City-State-Zip:	SARASOTA FL 34240

Title	S
Name	WESSEL, PATRICE M
Address	2200 BERN CREEK LOOP
City-State-Zip:	SARASOTA FL 34240
Title	VP
Name	ELWICK, GARY K
Address	4940 LAKEWOOD RANCH BLVD. SUITE 110
City-State-Zip:	SARASOTA FL 34240

*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:** THOMAS J WESSEL

DPT

02/12/2019

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

\_\_\_\_\_  
Date