2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 06, 2003 8:00 am
Secretary of State
02-06-2003 90075 024 ***150.00

DOCUMENT # G94621

1. Entity Name
WEST COAST DEVELOPMENT CORPORATION OF NAPLES, INC.

Principal Place of Business	Mailing Address
~~1100 COMMERCIAL BLVD #118~~ ~~NAPLES FL 34104~~ US	~~1100 COMMERCIAL BLVD #118~~ ~~NAPLES FL 34104~~ US

☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
3073 SOUTH HORSESHOE DRIVE	3073 SOUTH HORSESHOE DRIVE
Suite, Apt. #, etc. SUITE 118	Suite, Apt. #, etc. SUITE 118
City & State NAPLES, FLORIDA 34104	City & State NAPLES, FLORIDA 34104
Zip / Country	Zip / Country

4. FEI Number 59-2406106 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
ARNOLD,DONALD L.	Name
~~1100 COMMERCIAL BLVD #118~~	Street Address (P.O. Box Number is Not Acceptable) 3073 SOUTH HORSESHOE DRIVE SUITE 118
~~NAPLES FL 34104~~	City NAPLES, FLORIDA 34104 FL Zip Code

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 [signature] 2/04/03
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2003 Fee will be $550.00
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PTD VETTER, RICHARD 1100 COMMERCIAL BLVD #118 NAPLES FL 34104	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP: 3073 SOUTH HORSESHOE DRIVE SUITE 118 NAPLES, FLORIDA 34104	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VSD ARNOLD,DONALD 1100 COMMERCIAL BLVD #118 NAPLES FL 34104	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP: 3073 SOUTH HORSESHOE DRIVE SUITE 118 NAPLES, FLORIDA 34104	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
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CR2E034 (10/02)

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 all other like empowered.

SIGNATURE: SIGNATURE REQUIRED [signature] 2/04/03
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone # 239-643-6333