

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # K28285

1. Entity Name
FLORIDA WEST COAST REALTY, INC.

Principal Place of Business

3220 TOWHEE ST
ENGLEWOOD FL 34224

Mailing Address

3220 TOWHEE ST
ENGLEWOOD FL 34224

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number 65-0062551

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

SCHIRO, DIANA B.
3220 TOWHEE ST
ENGLEWOOD FL 34224

Name Wanda Jean Leach

Street Address (P.O. Box Number is Not Acceptable)

1499 South Mc Call Rd. Suite C

City Englewood

FL

Zip Code 34223

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.

SIGNATURE *Wanda Jean Leach*
Signature, typed or printed name of registered agent and title if applicable.

Wanda Jean Leach
(NOTE: Registered Agent signature required when reinstating)

4-16-2001
DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE DPV
NAME SCHIRO, DIANA B.
STREET ADDRESS 3220 TOWHEE ST
CITY-ST-ZIP ENGLEWOOD FL ☐ Delete

TITLE DPV
NAME Wanda Jean Leach
STREET ADDRESS 1499 S. Mc Call Rd. Suite C
CITY-ST-ZIP Englewood FL 34223 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Wanda Jean Leach*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-16-2001
Date

941
494-7171
Daytime Phone #

FILED
Apr 23, 2001 8:00 am
Secretary of State

04-23-2001 90032 047 ***150.00



DO NOT WRITE IN THIS SPACE

CR2E034 (10/00)