

**2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F13000001044

**Entity Name:** WEST COAST UNIVERSITY, INC.

**Current Principal Place of Business:**

9250 NW 36 ST STE 200  
DORAL, FL 33178

**Current Mailing Address:**

151 INNOVATION DRIVE  
IRVINE, CA 92617 US

**FEI Number: 95-4647739**

**Certificate of Status Desired: Yes**

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

PADRON, JOSHUA  
9250 NW 36 ST STE 200  
DORAL, FL 33178 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: JOSHUA PADRON**

**03/26/2018**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title SECRETARY  
Name CASANOVER, DAVID SCOTT  
Address 151 INNOVATION DRIVE  
City-State-Zip: IRVINE CA 92617

Title DIRECTOR  
Name PYLE, DAVID  
Address 151 INNOVATION DRIVE  
City-State-Zip: IRVINE CA 92617

Title PRESIDENT  
Name PHAM, SANDRA  
Address 151 INNOVATION DRIVE  
City-State-Zip: IRVINE CA 92617

Title CFO  
Name PHAM, SANDRA  
Address 151 INNOVATION DRIVE  
City-State-Zip: IRVINE CA 92617

Title PRESIDENT  
Name EGBERT, JEB  
Address 151 INNOVATION DRIVE  
City-State-Zip: IRVINE CA 92617

*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: DAVID SCOTT CASANOVER**

**GENERAL COUNSEL &  
CORPORATE  
SECRETARY**

**03/26/2018**

Electronic Signature of Signing Officer/Director Detail

Date