

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 21, 2003 8:00 am
Secretary of State

01-21-2003 90507 021 ***150.00

DOCUMENT # 262042

1. Entity Name
WEST COAST STEEL ERECTORS, INC.



Principal Place of Business
~~10070 BLOUNT RD~~ **18726 AVE. BIARRITZ**
~~LUTZ FL 33548~~ **33558-5307**
US

Mailing Address
PO BOX 16578
TAMPA FLA 33687-3578
US



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-0976837**

Applied For

Not Applicable

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

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

STANSEL, EDWARD L.
~~10070 BLOUNT ROAD~~ **18726 AVENUE BIARRITZ**
~~LUTZ FL 33548~~ **33558-5307**

Name

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

City

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, 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 ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PD** ☐ Delete
NAME **STANSEL, EDWARD L.**
STREET ADDRESS ~~10070 BLOUNT ROAD~~ **18726 AVE. BIARRITZ**
CITY-ST-ZIP ~~LUTZ FL~~ **33558-5307**

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

TITLE **VDS** ☐ Delete
NAME **NORRIS, BETTY JO**
STREET ADDRESS **5603 GALLANT FOX CT.**
CITY-ST-ZIP ~~5604 PURITY ROAD~~ **WESLEY CHAPEL, FL**
TAMPA FL **33544**

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

TITLE **D** ☐ Delete
NAME **KELLY, RONALD**
STREET ADDRESS **1211 LAKE CHARLES CIR**
CITY-ST-ZIP **LUTZ FL**

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

TITLE **D** ☐ Delete
NAME **STANSEL, DENNIS EDWARD**
STREET ADDRESS **904 STRATFORD MANOR DR**
CITY-ST-ZIP **BRANDON FL 33510**

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

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:

Edward L. Stansel
EDWARD L. STANSEL

Date

Daytime Phone #

1/16/03 813-949-1567

CR2E034 (10/02)