

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Northing
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 APR 28 PM 2:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 339525 (8)

1. Corporation Name

WEST COAST RESTAURANT EQUIPMENT INC

Principal Place of Business

**1925-14 ST W
BRADENTON FL 34205**

Mailing Address

**1925-14 ST W
BRADENTON FL 34205**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

12/31/1968

3a. Date of Last Report

06/01/1994

4. FEI Number

59-1226725

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes

☐ Yes ☐ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

24

Country

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

29

Country

30

9. Name and Address of Current Registered Agent

**BRIDGFORD, KIMBALL S
1925 14TH ST WEST
BRADENTON FL 34205**

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

(Signature, typed or printed name of registered agent and fee if applicable.)

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE	P
NAME	BRIDGFORD, KIMBALL S
STREET ADDRESS	7132 ANTIGUA PLACE
CITY - ST - ZIP	SARASOTA FL
TITLE	VPO
NAME	GARST, WILLIAM A
STREET ADDRESS	1810 7TH AVE WEST
CITY - ST - ZIP	PALMETTO FL
TITLE	VPM
NAME	BURKE, ROBERT
STREET ADDRESS	4725 SPAHN STREET
CITY - ST - ZIP	SARASOTA FL
TITLE	P
NAME	O'SHEA JR, CHARLES M
STREET ADDRESS	649 NORTON STREET
CITY - ST - ZIP	LONGBOAT KEY FL
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☒ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	1925 14TH ST. WEST
1.4 CITY - ST - ZIP	BRADENTON, FL 34205
2.1 TITLE	☒ Change ☐ Addition
2.2 NAME	4469 17TH ST. WEST
2.3 STREET ADDRESS	BRADENTON, FL 34207
2.4 CITY - ST - ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	Delete
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	Delete
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual 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 its incorporator or transferee as required to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or as an incorporator with no address.

SIGNATURE:

Kimball S. Bridgford
Kimball S. Bridgford

Date

Daytime / Home #

4/25/95 7473068