

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Apr 27 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # 438386 (5)
1. Corporation Name
WEST COAST TOMATO, INC.



Principal Place of Business Mailing Address
530 - 5TH AVENUE DRIVE WEST 530 - 5TH AVENUE DRIVE WEST
P.O. BOX 936 P.O. BOX 936
PALMETTO FL 34220 PALMETTO FL 34220

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		10/17/1973	
22 City & State		27 City & State		4. FEI Number	
23 Zip		28 Zip		59-1498535	
24 Country		29 Country		5. Certificate of Status Desired	
				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.	
				Applied For	
				Not Applicable	
				6. Election Campaign Financing Trust Fund Contribution	
				\$8.75 Additional Fee Required	
				\$5.00 May Be Added to Fees	
				Yes No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
DURYEY, DUANE E. 4403 24TH AVE E PALMETTO FL 34221				81 Name Duane E. Duryea			
				82 Street Address (P.O. Box Number is Not Acceptable)			
				530 Fifth Ave Dr. W.			
				83			
				84 City			
				Palmetto			
				FL			
				85 Zip Code			
				34221			

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 Duane E. Duryea DURYEY, DUANE E. 9/13/98
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	PT	[] DELETE		1.1 TITLE	[] Change [] Addition		
NAME	MCCLURE, DANIEL P.			1.2 NAME			
STREET ADDRESS	4820 RIVERVIEW BLVD. W			1.3 STREET ADDRESS			
CITY-ST-ZIP	BRADENTON FL			1.4 CITY-ST-ZIP			
TITLE	VS	[] DELETE		2.1 TITLE	[] Change [] Addition		
NAME	MCCLURE, CORRINE			2.2 NAME			
STREET ADDRESS	4820 RIVERVIEW BLVD. W			2.3 STREET ADDRESS			
CITY-ST-ZIP	BRADENTON FL			2.4 CITY-ST-ZIP			
TITLE	D	[] DELETE		3.1 TITLE	[] Change [] Addition		
NAME	MCCLURE, DANIEL P			3.2 NAME			
STREET ADDRESS	4820 RIVERVIEW BLVD. W.			3.3 STREET ADDRESS			
CITY-ST-ZIP	BRADENTON FL			3.4 CITY-ST-ZIP			
TITLE	D	[] DELETE		4.1 TITLE	[] Change [] Addition		
NAME	MCCLURE, CORRINE			4.2 NAME			
STREET ADDRESS	4820 RIVERVIEW BLVD. W			4.3 STREET ADDRESS			
CITY-ST-ZIP	BRADENTON FL			4.4 CITY-ST-ZIP			
TITLE		[] DELETE		5.1 TITLE	[] Change [] Addition		
NAME				5.2 NAME			
STREET ADDRESS				5.3 STREET ADDRESS			
CITY-ST-ZIP				5.4 CITY-ST-ZIP			
TITLE		[] DELETE		6.1 TITLE	[] Change [] Addition		
NAME				6.2 NAME			
STREET ADDRESS				6.3 STREET ADDRESS			
CITY-ST-ZIP				6.4 CITY-ST-ZIP			

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE Duane E. Duryea 9/13/98 Paul 722-14514

CR2E034 (10/97)