2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 438386

Entity Name: WEST COAST TOMATO, INC.

FILED Apr 03, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 502 6TH AVE W PALMETTO, FL 34221 US **Current Mailing Address: New Mailing Address:** P.O. BOX 936 PALMETTO, FL 34220 US FEI Number: 59-1498535 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: DURYEA, DUANE E. 502 6TH AVE. W PALMETTO, FL 34221 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition MCCLURE, DANIEL P., SPENCER, MARY A Name: Name: 4820 RIVERVIEW BLVD. W 4820 RIVERVIEW BLVD. W Address: Address: BRADENTON, FL 34209 City-St-Zip: BRADENTON FL City-St-Zip: VSD Title: Title: () Delete (X) Change () Addition MCCLURE, CORRINE A Name: MCCLURE, CORRINE, Name: 4820 RIVERVIEW BLVD. W 4820 RIVERVIEW BLVD. W Address: Address: BRADENTON, FL City-St-Zip: City-St-Zip: BRADENTON, FL 34209 Title: DST () Delete Title: () Change () Addition DURYEA, DUANE Name: Name: 4403 24TH AVE F Address: Address: City-St-Zip: PALMETTO, FL 34221 City-St-Zip: Title: DV () Delete Title: () Change () Addition MCCLURE, DANIEL C Name: Name: Address: 502 6TH AVE W Address: City-St-Zip: PALMETTO, FL 34221 City-St-Zip: Title: Title: () Delete () Change () Addition SPENCER, ROBERT N Name: Name: 4820 RIVERVIEW BLVD W Address: Address: City-St-Zip: BRADENTON, FL 34209 City-St-Zip: Title: () Delete Title: DV () Change (X) Addition Name: Name: MCCLURE, SCOTT L Address: Address: 1215 51ST ST W City-St-Zip: City-St-Zip: BRADENTON, FL 34209

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: DUANE DURYEA TREA 04/03/2007