

2014 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 728041

FILED
Oct 10, 2014
Secretary of State

Entity Name: WEST COAST MEDICAL AND EDUCATIONAL FOUNDATION, INC.

Current Principal Place of Business:

1345 WEST BAY DRIVE
SUITE 301
LARGO, FL 33770 US

New Principal Place of Business:

1345 WEST BAY DRIVE
SUITE #405
LARGO, FL 33770 US

Current Mailing Address:

1345 WEST BAY DRIVE
SUITE 301
LARGO, FL 33770 US

New Mailing Address:

1345 WEST BAY DRIVE
SUITE #405
LARGO, FL 33770 US

FEI Number: 23-7378002

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOLES, STANLEY S
1345 WEST BAY DRIVE
SUITE 301
LARGO, FL 33770 US

Name and Address of New Registered Agent:

MOLES, STANLEY S
1345 WEST BAY DRIVE
SUITE #405
LARGO, FL 33770 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: STANLEY S MOLES

10/10/2014

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PTS
Name: MOLES, STANLEY S
Address: 1345 WEST BAY DR. #405
City-St-Zip: LARGO, FL 33770 US

Title: V
Name: MOLES, MATTHEW
Address: 1345 WEST BAY DR. #405
City-St-Zip: LARGO, FL 33770 US

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: STANLEY S MOLES

PRES

10/10/2014

Electronic Signature of Signing Officer or Director

Date