

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 31, 2001 8:00 am
Secretary of State

08-31-2001 90113 026 ***150.00

DOCUMENT # F31706

1. Entity Name
WEST COAST CHARTER COMPANY

Principal Place of Business
P O BOX 55
ORLANDO FL 32802

Mailing Address
P O BOX 55
ORLANDO FL 32802



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address		4. FEI Number 59-2117465		Applied For
Suite, Apt. #, etc.		Suite, Apt. #, etc.				Not Applicable
City & State		City & State		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		
Zip	Country	Zip	Country			

6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent			
BEARD, KENNETH O 10600 S ORANGE AVE P O BOX 55 ORLANDO FL 32802				Name Donald G. Nagel			
				Street Address (P.O. Box Number is Not Acceptable) 7120 LAKE ELLENOR DR.			
				City Orlando FL 32809			
				Zip Code 32809			

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.

SIGNATURE *Donald G. Nagel* **Donald G. Nagel** **8-21-01**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) <input type="checkbox"/>	FILE NOW!!! FEE IS \$550.00 After September 12, 2001 Fee will be \$750.00 Make Check Payable to Department of State	10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
---	--	--

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD STRATES, JAMES E. 7120 LAKE ELLENOR DRIVE ORLANDO FL 32809 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ASD MAGID, SUSAN STRATES 7120 LAKE ELLENOR DRIVE ORLANDO FL 32809 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ASD STRATES, PHYLLIS R 7120 LAKE ELLENOR DRIVE ORLANDO FL 32809 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S STRATES, E. JAY 7120 LAKE ELLENOR DRIVE ORLANDO FL 32809 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS DOREMUS, SIBYL STRATES 7120 LAKE ELLENOR DRIVE ORLANDO FL 32809 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS STRATES, JOHN E. 7120 LAKE ELLENOR DRIVE ORLANDO FL 32809 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Susan Magid* **Susan Magid** **8-21-01** **407-855-3939**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

0011597 AV

CR2E034 (5/01)

F31706
B0062825

August 24, 2001

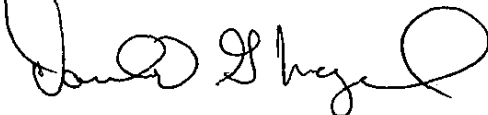
Florida Department of State
Division Of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Dear Sir/Madam:

Please find enclosed, a check in the amount of \$150.00 for the 2001 Uniform Business Report Filing Fee for West Coast Charter Company FEI #59-2117465. The original forms were never received by our office.

At this time we would like to request that you accept the original filing fee. Please take into consideration, that we are filing a number of these forms and cannot afford the additional fees. Should you have any questions please feel free to contact me at 407-855-3939.

Sincerely,



Donald G. Nagel
Controller