

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F56488

FILED
Apr 04, 2009
Secretary of State

Entity Name: CCT WEST COAST, INC.

Current Principal Place of Business:

5332 BARCLAY AVE
BROOKSVILLE, FL 34609 US

New Principal Place of Business:

17348 NICASIO JAY AVE
WEEKI WACHEE, FL 34614 US

Current Mailing Address:

5332 BARCLAY AVE
BROOKSVILLE, FL 34609 US

New Mailing Address:

17348 NICASIO JAY AVE
WEEKI WACHEE, FL 34614 US

FEI Number: 59-2140381

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FYOCK, SHERRILYN
5332 BARCLAY AVE
BROOKSVILLE, FL 34609 US

Name and Address of New Registered Agent:

FYOCK, SHERRILYN
17348 NICASIO JAY AVE
WEEKI WACHEE, FL 34614 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:

04/04/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: FYOCK, FRANK N, JR,
Address: 5332 BARCLAY AVE
City-St-Zip: BROOKSVILLE, FL 34609

Title: D () Delete
Name: FYOCK, SHERRILYN C,
Address: 5332 BARCLAY AVE
City-St-Zip: BROOKSVILLE, FL 34609

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: FYOCK, FRANK N, JR,
Address: 17348 NICASIO JAY AVE
City-St-Zip: WEEKI WACHEE, FL 34614

Title: D (X) Change () Addition
Name: FYOCK, SHERRILYN C,
Address: 17348 NICASIO JAY AVE
City-St-Zip: WEEKI WACHEE, FL 34614

I hereby certify that the information supplied with this filing does not qualify 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: SHERRILYN FYOCK

D

04/04/2009

Electronic Signature of Signing Officer or Director

Date