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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # H66223

(9)

WEST COAST CONCORD, INC.

Principal Place of Business 2454 MCMULLEN BOOTH RD. Mailing Address

FILED May 19 1998 8:00am Secretary of State



2454 MCMULLEN BOOTH RD. CLEARWATER FL 34619 CLEARWATER FL 34619 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/10/1985 2. Principal Place of Business 2a, Mailing Address 4. FEI Number Applied For 59-2561819 Not Applicable 21 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees 28 Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible □ No Yes 24 30 Personal Property Tax due June 30. 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 KEVLIN, ROSS PATRICK 20 BEECHTREE CT. 82 Street Address (P.O. Box Number is Not Acceptable) PALM HARBOR FL 34883 83 84 City Zip Code 85 11. Pursuant to the provisions of Sections 607.05.02 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. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature: typed or production in of repeliered agent and title diapplicable (NOTE: Registered Agent signature required when reinstating) CRZE034 (10/97 12, OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE DELETE 1.1 TITLE ☐ Change ☐ Addition **KEVLIN, ROSS PATRICK** NAME 20 BEECHTREE CT. STREET ADDRESS 1.3 STREET ADDRESS PALM HARBOR FL CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change Addition 2.1 TITLE KEVLIN. PAULETTE WALLER 2.2 NAME 20 BEECHTREE CT. STREET ADDRESS 2.3 STREFT ADDRESS PALM HARBOR FL CITY-ST-ZIP 2 4 CiTY-ST-ZiP DELETE ☐ Change Addition TITLE 3.1 TITLE 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - \$1 - ZIP DELETE Change TITLE 4.1 TITLE ___ Addition 4.2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition TITLE 5.1 TITLE 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 61 TITLE 62 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY - ST - ZIP 6.4 CITY - S1 - ZIP

14. I hereby certify that the information supplied with this filling 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 of yusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, or on an artist, part of the corporation of the receiver of the corporation of the receiver of yusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, or on an artist, part of the corporation of the receiver o

SIGNATURE:

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813-789-0252