2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 21, 2005
Secretary of State

DOCUMENT# L03000045562

Entity Name: WEST COAST LAND COMPANY, LLC

Current Principal Place of Business:

5611 SW 14TH AVENUE
CAPE CORAL, FL 33914 US

New Principal Place of Business:

2416 CAPE CORAL PKY W.
CAPE CORAL, FL 33914 US

Current Mailing Address:

5611 SW 14TH AVENUE
CAPE CORAL, FL 33914 US

New Mailing Address:

2416 CAPE CORAL PKY W.
CAPE CORAL, FL 33914 US

FEI Number: 20-0900791 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

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

MANAGING MEMBERS/MEMBERS:

Title: MGR ( ) Delete
Name: CLAWSON, JERRY B
Address: 5611 SW 14TH AVE
City-St-Zip: CAPE CORAL, FL 33914 US

Title: MGR ( ) Delete
Name: LIESKE, CHUCK
Address: 28371 DEL LAGO WAY
City-St-Zip: BONITA SPRINGS, FL 34135 US

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: CLAWSON, JERRY B
Address: 2416 CAPE CORAL PKY W.
City-St-Zip: CAPE CORAL, FL 33914 US

Title: MGR (X) Change ( ) Addition
Name: LIESKE, CHUCK
Address: 5611 SW 14TH AV
City-St-Zip: CAPE CORAL, FL 33914 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: JERRY CLAWSON MGR 04/21/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date