

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000049667

FILED  
Jan 28, 2005  
Secretary of State

Entity Name: WESTCOAST PROPERTIES LLC

**Current Principal Place of Business:**

4571 STEPHEN CIRCLE NW  
CANTON, OH 44718

**New Principal Place of Business:**

**Current Mailing Address:**

4571 STEPHEN CIRCLE NW  
CANTON, OH 44718

**New Mailing Address:**

FEI Number: 37-1493185

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CALABRETTA, JOSEPH W  
20944 ISLAND SOUND CIR #104  
ESTERO, FL 33928 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: MGRM ( ) Delete  
Name: CALABRETTA, JOSEPH W  
Address: 2643 NARROWS WAY  
City-St-Zip: AKRON, OH 33928

Title: MGRM ( ) Delete  
Name: KROLL, WAYNE  
Address: 2854 NARROWS WAY  
City-St-Zip: AKRON, OH 33928

Title: MGRM ( ) Delete  
Name: BENDETTA, CHARLES  
Address: 423 HEATHER CIRCLE NE  
City-St-Zip: NORTH CANTON, OH 44720

Title: MGRM ( ) Delete  
Name: SCHEETZ, JON  
Address: 7384 BRAUCHER PLACE NW  
City-St-Zip: NORTH CANTON, OH 44721

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: JOSEPH W. CALABRETTA

MR

01/28/2005

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