

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000079251

FILED
Aug 10, 2005
Secretary of State

Entity Name: WESTCOAST PROPERTIES USA, LLC

Current Principal Place of Business:

4202 OLD MULBERRY ROAD
PLANT CITY, FL 335673912 US

New Principal Place of Business:

713 N. PARK ROAD
SUITE 100
PLANT CITY, FL 335633980 US

Current Mailing Address:

4202 OLD MULBERRY ROAD
PLANT CITY, FL 335673912 US

New Mailing Address:

713 N. PARK ROAD
SUITE 100
PLANT CITY, FL 335633980 US

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

LOPEZ, TIMOTHY M SR
4202 OLD MULBERRY ROAD
PLANT CITY, FL 335673912 US

Name and Address of New Registered Agent:

LOPEZ, TIMOTHY M SR
713 N. PARK ROAD
SUITE 100
PLANT CITY, FL 335633980 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: TIMOTHY M. LOPEZ

08/10/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: LOPEZ, PAMELA J
Address: 4202 OLD MULBERRY ROAD
City-St-Zip: PLANT CITY, FL 335673912 US

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: LOPEZ, PAMELA J
Address: 713 N. PARK ROAD, SUITE 100
City-St-Zip: PLANT CITY, FL 335633980 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: TIMOTHY M. LOPEZ

RA

08/10/2005

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