

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000023227

**FILED**  
**Apr 08, 2010**  
**Secretary of State**

**Entity Name:** WEST COAST LAND SERVICES, LLC

**Current Principal Place of Business:**

16415 SR 62  
PARRISH, FL 34219

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 126  
PARRISH, FL 34219

**New Mailing Address:**

**FEI Number:** 20-2450140

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

A TAX SHELTER  
3704 US HIGHWAY 301  
SUITE 3  
ELLENTON, FL 34222 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/MANAGERS:**

Title: MGRM  
Name: KIPP, ROBERT E  
Address: 16415 SR 62  
City-St-Zip: PARRISH, FL 34219

Title: MGRM  
Name: KIPP, MALINDA  
Address: 16415 SR 62  
City-St-Zip: PARRISH, FL 34219

I hereby 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: MALINDA KIPP

MGRM

04/08/2010

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