


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 31, 2008 08:00 A
Secretary of State

DOCUMENT # L05000111305


1. Entity Name
WEST COAST TITLE & CLOSING SERVICES, LLC



Principal Place of Business
**3080 TAMiami TRAIL EAST
 NAPLES, FL 34112**

Mailing Address
**3080 TAMiami TRAIL EAST
 NAPLES, FL 34112**

DO NOT WRITE IN THIS SPACE



01212008 No Chg-LLC CR2E083 (12/07)

4. FEI Number 20-3796809	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent

**COGHILL, TRACY L
 3080 TAMiami TRAIL EAST
 NAPLES, FL 34112**

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

U00000875353
 04/11/08-80030-014 138.75

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY- ST- ZIP	MGR COGHILL, TRACY 3080 TAMiami TR E NAPLES, FL 34112
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: *Tracy Coghill* **1-22-08 239-649-4900**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #