2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000007957

FILED May 01, 2008 Secretary of State

Entity Name: WESTCOAST SCHOOL FOR HUMAN DEVELOPMENT CORPORATION

Current Principal Place of Business:		New Principal Place of Business:	
10500 NW 7TH AVENUE		5258 NW 186TH LANE	
MIAMI, FL 33150		MIAMI GARDENS, FL 33055	
Current Mailing Address:		New Mailing Address:	
5258 NW 186TH LANE		5258 NW 186TH LANE	
MIAMI, FL 33055		MIAMI GARDENS, FL 33055	
n accordan	65-1064559 FEI Number Applied For() FEI N ce with s. 607.193(2)(b), F.S., the corporation did not receive Address of Current Registered Agent:	-	()
VICKERS, WARNELL		VICKERS, WARNELL	
5258 NW 186TH LANE		5258 NW 186TH LANE	
MIAMI, FL 33055 US		MIAMI GARDENS, FL 33055 US	
	named entity submits this statement for the purpose of Florida.	of changing	its registered office or registered agent, or both,
SIGNATUF	RE:		05/01/2008
	Electronic Signature of Registered Agent		Date
OFFICERS AND DIRECTORS:		ADDITION	NS/CHANGES TO OFFICERS AND DIRECTORS:
Title:	PD () Delete	Title:	PD (X) Change () Addition
Name:	VICKERS, WARNELL	Name:	VICKERS, WARNELL
Address:	5258 NW 186TH LANE	Address:	5258 NW 186TH LANE
City-St-Zip:	MIAMI, FL 33055	City-St-Zip:	MIAMI GARDENS, FL 33055
Title:	VPD () Delete	Title:	() Change () Addition
Name:	KNIGHTON, LYDIA	Name:	
Address:	3500 NW 25TH STREET	Address:	
City-St-Zip:	LAUDERDALE LAKES, FL 33311	City-St-Zip:	
Title:	SD () Delete	Title:	() Change () Addition
Name:	HARRIS, JANICE	Name:	
Address:	20325 NE 12TH AVENUE	Address:	
City-St-Zip:	MIAMI, FL 33179	City-St-Zip:	
Title:	TD () Delete	Title:	()Change ()Addition
Name:	VICKERS, ROBIN	Name:	
Address:	5258 NW 186TH LANE	Address:	
City-St-Zip:	OPA LOCKA, FL 33055	City-St-Zip:	
Title:	D () Delete	Title:	() Change () Addition
Name:	KING, VERONICA	Name:	
Address:	20325 NE 12TH AVENUE	Address:	
City-St-Zip:	MIAMI, FL 33179	City-St-Zip:	
Title:	D () Delete	Title:	()Change ()Addition
Name:	JOHNSON, LOUISE	Name:	
Address:	5414 SW 19TH STREET	Address:	
City-St-Zip:	HOLLYWOOD, FL 33023	City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WARNELL VICKERS PD 05/01/2008