## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

nachi N. Hru

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

## FILED DOCUMENT # N03000010966 FSU COM/WEST COAST, INC. 08 MAR 24 PM 1: 17 SECHETART OF STATE Principal Place of Business Mailing Address TALLAHASSEE, FLORIDA THE FLORIDA STATE UNIVERSITY THE FLORIDA STATE UNIVERSITY 211 WESTCOTT BUILDING 211 WESTCOTT BUILDING TALLAHASSEE, FL 32306-1470 TALLAHASSEE, FL 32306-1470 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 03062008 Chg-NP CR2E037 (12/06) City & State City & State 4. FEI Number NOT APPLICABLE Applied For Not Applicable Žip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name STEFFENS, BETTY THE FLORIDA STATE UNIVERSITY Street Address (P.O. Box Number is Not Acceptable) 211 WESTCOTT BUILDING TALLAHASSEE, FL 32306-1470 Zip Code FL 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. Betty Steffens 3/6/08 (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Filing Fee is \$61.25 Make check payable to \$5.00 May Be Due by May 1, 2008 Trust Fund Contribution. Florida Department of State Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. TITLE See attached for ☐ Detete TITLE ☐ Addition BRIGHT, ADAM MD NAME NAME complete list of 4937 CLARK ROAD STREET ADDRESS STREET ADDRESS directors CITY-ST-ZIP SARASOTA, FL 34233 CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition FINLAY, G. DUNCAN JR, MD NAME NAME STREET ADDRESS 1700 S TAMIAMI TRAIL STREET ADDRESS CITY-ST-7IP SARASOTA, FL 34239 CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition HILL, MOLLIE H NAME NAME 1269 W CALL STREET STREET ADDRESS STREET ADDRESS CITY-ST-ZIP TALLAHASSEE, FL 323064300 CITY-ST-7iP TITLE ☐ Delete ☐ Change TITLE ☐ Addition **600121111796** 03/25/08-01004-018 \*\*61.25 NAME LITTLES, ALMA NAME STREET ADDRESS 1269 W CALL STREET STREET ADDRESS TALLAHASSEE, FL 323064300 CHY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition MEADE, ROBERT C NAME NAME STREET ADDRESS 5731 BEE RIDGE ROAD STREET ADDRESS CITY-ST-ZIP SARASOTA, FL 34233 CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition MACLEOD, SANDRA K NAME NAME 2200 RINGLING BLVD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP SARASOTA, FL 34237 CITY-ST-ZIP 12. 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 or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

3/10/08

850-644-8596

Daytime Phone #



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