2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 11, 2008
Secretary of State

DOCUMENT# N04000004255

Entity Name: WEST BEACHES COMMUNITY COALITION, INC

Current Principal Place of Business:

4390 RICHMOND PARK DR. E
JACKSONVILLE, FL 32224 US

New Principal Place of Business:

Current Mailing Address:

4390 RICHMOND PARK DR. E
JACKSONVILLE, FL 32224 US

New Mailing Address:

FEI Number: 52-2444707 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SHINE, FRANCIS S
4390 RICHMOND PARK DR. E
JACKSONVILLE, FL 32224 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

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: SHINE, FRANCIS S
Address: 4390 RICHMOND PARK DR. E
City-St-Zip: JACKSONVILLE, FL 32224

Title: VP ( ) Delete
Name: MEDINA, ERNIE .
Address: 4039 GLENHURST DR. N
City-St-Zip: JACKSONVILLE, FL 32224

Title: VP ( ) Delete
Name: STEWART, LARRY .
Address: 3817 MICHAELS LANDING CIRCLE
City-St-Zip: JACKSONVILLE, FL 32224

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change ( ) Addition
Name: ROBERT, GOLD .
Address: 4026 WINDSOR PARK DR. E
City-St-Zip: JACKSONVILLE, FL 32224

Title: VP (X) Change ( ) Addition
Name: WARREN, ANDERSON .
Address: 2029 N 3RD STREET
City-St-Zip: JACKSONVILLE BEACH, FL 32250

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: FRANCIS SCOTT SHINE P 02/11/2008

Electronic Signature of Signing Officer or Director — Date