

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000007184

FILED  
Mar 24, 2008  
Secretary of State

Entity Name: WEST COAST PLAYERS INC.

## Current Principal Place of Business:

750 SAN SALVADOR STREET  
DUNEDIN, FL 34698 US

## New Principal Place of Business:

21905 US 19 NORTH  
CLEARWATER, FL 33765 US

## Current Mailing Address:

P. O. BOX 1602  
DUNEDIN, FL 34697 US

## New Mailing Address:

21905 US 19 NORTH  
CLEARWATER, FL 33765 US

FEI Number: 26-0175136

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

DANIEL, LESI S  
14394 86TH AVENUE NORTH  
SEMINOLE, FL 33776 US

## Name and Address of New Registered Agent:

JONAP, LESI S  
1306 COUNTRY TRAILS DRIVE  
SAFETY HARBOR, FL 34695 US

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: LESI S JONAP

03/24/2008

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: MOHNEY, ALAN  
Address: 6750 122 1ST AVENUE #8  
City-St-Zip: LARGO, FL 33773 US

Title: VP ( ) Delete  
Name: FRAEBEL, GINNY  
Address: 11 SAN MARCO STREET #704  
City-St-Zip: CLEARWATER BEACH, FL 33767 US

Title: S ( ) Delete  
Name: DANIEL, LESI S  
Address: 14394 86TH AVENUE NORTH  
City-St-Zip: SEMINOLE, FL 33776 US

Title: T ( ) Delete  
Name: HARBER, BILL  
Address: 1295 AMBERLEA CT. WEST  
City-St-Zip: DUNEDIN, FL 34698 US

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: S (X) Change ( ) Addition  
Name: JONAP, LESI S  
Address: 1306 COUNTRY TRAILS DRIVE  
City-St-Zip: SAFETY HARBOR, FL 34695 US

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

Title: VP ( ) Change (X) Addition  
Name: FREEMAN, JASON D  
Address: 645 VILLAGE WAY  
City-St-Zip: PALM HARBOR, FL 34683

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: LESI S JONAP

S

03/24/2008

Electronic Signature of Signing Officer or Director

Date