

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000002194

FILED
Apr 08, 2008
Secretary of State

Entity Name: WEST COAST VISTA CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

WEST COAST VISTA
24 GULF BLVD.
INDIAN ROCKS BEACH, FL 33785 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 14357
CLEARWATER, FL 33766

New Mailing Address:

FEI Number: 59-3316474

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AMERI-TECH REALTY, INC.
1799-B NORTH BELCHER ROAD
CLEARWATER, FL 33765 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: VPD () Delete
Name: PYTLIK, JOANNE
Address: 7755 CAMDEN HARBOUR DR
City-St-Zip: BRADENTON, FL 34212

Title: PD () Delete
Name: KING, RICHARD
Address: 11326 Q STREET
City-St-Zip: OMAHA, NE 68137

Title: TD () Delete
Name: HOPKINS, LORI
Address: 912 BAY POINT DRIVE
City-St-Zip: MADEIRA BEACH, FL 33708

Title: SD () Delete
Name: ALTIERI, TINA
Address: 2336 HOLSTON AVE
City-St-Zip: SPRING HILL, FL 34608

Title: D () Delete
Name: CHEATHAM, LISA
Address: 1307 STATE STREET
City-St-Zip: OTTAWA, IL 61350

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TD (X) Change () Addition
Name: PYTLIK, JOANNE
Address: 7755 CAMDEN HARBOUR DR
City-St-Zip: BRADENTON, FL 34212

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

Title: D (X) Change () Addition
Name: HOPKINS, LORI
Address: 912 BAY POINT DRIVE
City-St-Zip: MADEIRA BEACH, FL 33708

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

Title: () Change () Addition
Name:
Address:
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: RICHARD KING

PD

04/08/2008

Electronic Signature of Signing Officer or Director

Date