FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999

DOCUMENT # N9400003934

WEST COAST HOLDINGS, INC.

Principal Place of Business

6363 9TH AVE N ST PETERSBURG FL 33710

2. Principal Place of Business

Mailing Address

6363 9TH AVE N

2a. Mailing Address

ST PETERSBURG FL 33710

FILED May 06, 1999 8:00 am Secretary of State

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3. Date Incorporated or Qualifed

08/10/1994

<u> </u>								4 ==: 1:				
Suite, Apt.	#, etc.	\vdash	Suite, Apt. #, etc.				4. FEI Number NOT. APPLICABLE				Applied For Not Applicable	
22		27						1401 ALLEOADEL		11		
City & State	Đ	⊢ '	City & State					5. Certifcate of Status Desired	. .		Additional equired	
23	Country	28 Zip		Cou	ntn.			e management				
Zip 24					Country			Election Campaign Financi Trust Fund Contribution	ng 🗆		May Be to Fees	
24	9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent						
7. Name and Address of Current Registered Agent						Name						
DIVITO, JOSEPH A						82 Street Address (P.O. Box Number is Not Acceptable)						
4514 CENTRAL AVE												
ST PETERSBURG FL 33711												
						City	-		FL	85 Zip	Code	
								tion submits this statement for		- 1 1	registered	
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered												
agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.												
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE												
	Signature, typed or printed name of registered agent a				Agent	signature requ	ired wh		DATE	ID DIDECTO	DC (N 12	
12.	OFFICERS AND	DIRECTOR		13.				ADDITIONS/CHANGES TO	OFFICERS AF	Change	Addition	
TITLE	D		☐ DELETE	1,1 111	l.E					□ Cuande	1 Addition	
NAME	MULDOON, BRENDAN			1.2 NA	ME							
STREET ADDRESS	6363 9TH AVE N			1.3 ST	REET	ADDRESS					ì	
CITY-ST-ZIP	ST PETERSBURG FL 33710			1.4 CIT	Y-ST	-ZIP						
TITLE	D		☐ DELETE	2.1 TIT	LΕ					Change	☐ Addition i	
NAME	GIBBONS, ROBERT C			2.2 NA	MĒ	į						
STREET ADDRESS	6363 9TH AVE N			2.3 ST	REET	ADDRESS .					ļ	
CITY-ST-ZIP	ST PETERSBURG FL 33710			2. 4 CI	TY-ST	r- ZIP						
TITLE	ST		☐ DELETE	3.1 TIT	LE					Change	☐ Addition	
NAME	WARD, PAUL A. J			3.2 NA	ME							
STREET ADDRESS	6363-9TH AVE., N			3.3 ST	REET	ADDRESS						
CITY-ST-ZIP	ST PETERSBURG FL		400	3.4. CI	TY-ST	r- ZIP						
TITLE	С		☐ DELETE	4.1 TIT	Œ					Change	☐ Addition	
NAME	LYNCH, ROBERT N			4. 2 N	AME							
STREET ADDRESS	6363 9TH AVENUE NORTH			4.3 ST	REET.	ADDRESS					Ì	
CITY-ST-ZIP	ST. PETERSBURG FL			4.4 CI	Y-ST	-ZIP						
TILE			☐ DELETE	5.1 TIT	LE	1)			Change	Addition	
NAME				5.2 NA	ME	1	DEP	TULA, ELIZABE	TH M.		1	
STREET ADDRESS				5.3 ST	REET	ADDRESS (636	3 9th AVE N			{	
CITY-ST-ZIP				5.4 CI	ry-st			PETERSBURG FL	3371			
TITLE			□ DELETE	6.1 TIT	LΕ			· —		Change	☐ Addition	
NAME				6.2 NA	ME							
STREET ADORESS				6.3 ST	REET.	ADDRESS						
CITY-ST-ZIP				6.4 CIT	TY-ST	-ZIP						
	actify that the information supplied with	this filing d	one not qualify for	the ever	mntic	on stated i	n Sect	tion 119 07(3)(i) Florida Statut	es I further ce	rtify that the	information	

Indicated on this annual report or supplied with this limit does not quality for the exemption stated in Section 119.07(3)(1). Florida Statutes. If further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: