2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 12, 2008
Secretary of State

DOCUMENT# N96000006100

Entity Name: WEST COAST GOLF COURSE SUPER. ASSN., INC.

Current Principal Place of Business:

1760 N.W. PINE LAKE DRIVE
STUART, FL 34994

New Principal Place of Business:

1936 BRUCE B. DOWNS BLVD #305
WESLEY CHAPEL, FL 33544

Current Mailing Address:

1760 N.W. PINE LAKE DRIVE
STUART, FL 34994

New Mailing Address:

1936 BRUCE B. DOWNS BLVD #305
WESLEY CHAPEL, FL 33544

FEI Number: 91-1931031 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

ROBERTS, MARIE
1760 NW PINE LAKE DRIVE
STUART, FL 34994 US

Name and Address of New Registered Agent:

HALEY, CHRISTI
1936 BRUCE B. DOWNS BLVD #305
WESLEY CHAPEL, FL 33544 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: CHRISTI HALEY 08/12/2008
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: VD ( ) Delete
Name: VANETTEN, DUANE
Address: 2669 ST ANDREWS BLVD
City-St-Zip: TARPON SPRINGS, FL 34688

Title: PD ( ) Delete
Name: KISTLER, BILL
Address: 5811 TAMPA BLVD.
City-St-Zip: TAMPA, FL 33647

Title: STD ( ) Delete
Name: INMAN, TRENT
Address: 13600 NATIONAL GOLF DR
City-St-Zip: TAMPA, FL 33626

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: BILL KISTLER PD 08/12/2008
Electronic Signature of Signing Officer or Director Date