2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000001318

Entity Name: WEST COAST AIRBOAT, CLUB, INC.

FILED Jan 20, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 13125 FAIRWIND RD HUDSON, FL 34669 US **Current Mailing Address: New Mailing Address:** 13125 FAIRWIND RD HUDSON, FL 34669 US FEI Number: 59-3539980 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: PADOVA, ANDERSON PADOVA, ANDREW 13024 SPANDLING DR 13024 SPANDLING DR HUDSON, FL 34669 HUDSON, FL 34669 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: ANDREW PADOVA 01/20/2004 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete PADOVA, ANDREW Name: Name: 13024 SPANDLING DR Address: Address: City-St-Zip: HUDSON, FL 34669 City-St-Zip: Title: VD () Delete Title: () Change () Addition Name: FOSS, DARREL Name: Address: 3532 EAGLE NEST DR Address: City-St-Zip: HERNANDO BEACH, FL 34607 City-St-Zip: Title: (X) Delete Title: () Change () Addition BERGER, SANDY Name: Name: 6640 DEON STREET Address: Address: City-St-Zip: NEW PORT RICHEY, FL 34652 City-St-Zip: Title: (X) Delete Title: () Change () Addition STALLARD, NANCY Name: Name: 7442 TERRACE DRIVE Address: Address: City-St-Zip: HUDSON, FL 34667 City-St-Zip: Title: () Delete Title: () Change () Addition ROSSLER, FRED Name: Name: 13413 LITEWOOD DR. Address: Address: City-St-Zip: HUDSON, FL 34669 City-St-Zip: Title: () Delete Title: () Change () Addition BARRIE DAN Name: Name: Address: 12723 CIRCLE LAKE DR Address: HUDSON, FL 34669 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ANDREW PADOVA P 01/20/2004