

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000001318

FILED
Mar 03, 2006
Secretary of State

Entity Name: WEST COAST AIRBOAT, CLUB, INC.

Current Principal Place of Business:

13125 FAIRWIND RD
HUDSON, FL 34669 US

New Principal Place of Business:

Current Mailing Address:

13125 FAIRWIND RD
HUDSON, FL 34669 US

New Mailing Address:

FEI Number: 59-3539980

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PADOVA, ANDREW
13024 SPANDLING DR
HUDSON, FL 34669 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: PD () Delete
Name: PADOVA, ANDREW
Address: 13024 SPANDLING DR
City-St-Zip: HUDSON, FL 34669

Title: VD () Delete
Name: FOSS, DARREL
Address: 3532 EAGLE NEST DR
City-St-Zip: HERNANDO BEACH, FL 34607

Title: O () Delete
Name: ALRED, DEBBIE
Address: 7442 TERRACE DR.
City-St-Zip: HUDSON, FL 34667

Title: D (X) Delete
Name: BARRIE, DAN
Address: 12723 CIRCLE LAKE DR
City-St-Zip: HUDSON, FL 34669

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VD (X) Change () Addition
Name: WALTERS, PHIL
Address: 16147 RAVENDALE DR.
City-St-Zip: TAMPA, FL 33618

Title: O (X) Change () Addition
Name: CRIBB, ALAN
Address: 7118 WASHINGTON ST.
City-St-Zip: NEW PORT RICHEY,, FL 34652

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

I hereby certify that the information supplied with this filing does not qualify for the 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: ANDREW PADOVA

PD

03/03/2006

Electronic Signature of Signing Officer or Director

Date