2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000090434

Title:

Name:

Address: City-St-Zip:

Entity Name: WEST COAST HOAGIES CORP.

() Delete

1238 HIGHWAY 85 CONNECTOR

CLANCY, CYNTHIALU F

BROOKS, GA 30205 US

FILED Mar 14, 2005 Secretary of State

Current Principal Place of Business:			New Principal Plac	New Principal Place of Business:	
SUITE A69	RAL AVENUE 11 SBURG, FL 33713	US	2128 9TH AVE. N. ST. PETERSBURG	FL 33713 US	
Current Mailing Address:			New Mailing Addre	New Mailing Address:	
SUITE A69	RAL AVENUE 11 SBURG, FL 33713	US	2128 9TH AVE. N. ST. PETERSBURG	FL 33713 US	
FEI Number:	20-0162729 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:					
WINEBRENNER, JACK M 3773 CENTRAL AVENUE ST. PETERSBURG, FL 33713 US			PAQUETTE, JOHN 6911 12TH ST. N. ST. PETERSBURG		
The above in the State		ts this statement for the pu	rpose of changing its registe	red office or registered agent, or both,	
SIGNATURE: JOHN C. PAQUETTE				03/14/2005	
Electronic Signature of Registered Agent			nt	Date	
Election Cam	paign Financing Trust	Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHAN	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () Delete PAQUETTE, JOHN 6911 12TH STREET N ST. PETERSBURG, FL	ORTH	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VS () Delete PAQUETTE, KAREN 6911 12TH STREET N SAINT PETERSBURG,	ORTH	Title: Name: Address: City-St-Zip:	() Change () Addition	

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: KAREN PAQUETTE VS 03/14/2005

() Change () Addition