

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000103162

FILED
Jul 01, 2005
Secretary of State

Entity Name: WEST COAST BRICK PAVERS INC.

Current Principal Place of Business:

2340 BRUNER LANE
REAR
FORT MYERS, FL 33912

New Principal Place of Business:

Current Mailing Address:

16 FULLER WAY
PLYMOUTH, MA 02360

New Mailing Address:

2340 BRUNER LANE
FORT MYERS, FL 33912

FEI Number: 20-1358377

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCMANUS, PATRICK M
2662 BAY CITY TERRACE
NORTHPORT, FL 34286 US

Name and Address of New Registered Agent:

MCMANUS, PATRICK M
2451 LERYL AVE
NORTHPORT, FL 34286 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:

07/01/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MCMANUS, PATRICK M
Address: 2662 BAY CITY TERRACE
City-St-Zip: NORTH PORT, FL 34286

Title: VP () Delete
Name: MCMANUS, ROBERT G
Address: 16 FULLER WAY
City-St-Zip: PLYMOUTH, MA 02360

Title: TREAS () Delete
Name: MCMANUS, BRIAN D
Address: 6 COLT DRIVE
City-St-Zip: BURLINGTON, NJ 08016

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 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.

SIGNATURE: ROBERT G. MCMANUS

V.P.

07/01/2005

Electronic Signature of Signing Officer or Director

Date