## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000024083

Entity Name: WEST COAST SERVICES COMPANY INC.

FILED Apr 20, 2006 Secretary of State

cipal Place of Business:

2340 BRUNER LANE FORT MYERS, FL 33912

Current Mailing Address: New Mailing Address:

16 FULLER WAY 6 COLT DRIVE

PLYMOUTH, MA 02360 BURLINGTON, NJ 08016

FEI Number: 34-2035938 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

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

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: PATRICK M. MCMANUS 04/20/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

MCMANUS, BRIAN D

BURLINGTON, NJ 08016

6 COLT DRIVE

Name:

Address: City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P ( ) Delete Title: P (X) Change ( ) Addition Name: MCMANUS, PATRICK M Name: MCMANUS, PATRICK M

 Name:
 MCMANUS, PATRICK M
 Name:
 MCMANUS, PATRICK M

 Address:
 2662 BAY CITY TERRACE
 Address:
 2451 LERYL AVE

 City-St-Zip:
 NORTHPORT, FL 34286
 City-St-Zip:
 NORTHPORT, FL 34286

Name: MCMANUS, ROBERT G Name: MCMANUS, ROBERT G

Address: 16 FULLER WAY Address: 16200 BAYSIDE POINTE E UNIT 1408

City-St-Zip: PLYMOUTH, MA 02360 City-St-Zip: FORT MYERS, FL 33908

Title: TREA ( ) Delete 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 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 VP 04/20/2006