

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000024083

FILED
Sep 14, 2007
Secretary of State

Entity Name: WEST COAST SERVICES COMPANY INC.

Current Principal Place of Business:

2340 BRUNER LANE
FORT MYERS, FL 33912

New Principal Place of Business:

2180 MARAVILLA LANE
FORT MYERS, FL 33901

Current Mailing Address:

6 COLT DRIVE
BURLINGTON, NJ 08016

New Mailing Address:

FEI Number: 34-2035938

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCMANUS, PATRICK M
2451 LERYL AVE
NORTHPORT, FL 34286 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

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: 2451 LERYL AVE
City-St-Zip: NORTHPORT, FL 34286

Title: VP () Delete
Name: MCMANUS, ROBERT G
Address: 16200 BAYSIDE POINTE E UNIT 1408
City-St-Zip: FORT MYERS, FL 33908

Title: TREA () 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: VP (X) Change () Addition
Name: MCMANUS, ROBERT G
Address: 9129 GLADIOLUS PRESERVE CIRCLE
City-St-Zip: FORT MYERS, FL 33908

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

I hereby certify that the information supplied with this filing does not qualify 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

09/14/2007

Electronic Signature of Signing Officer or Director

Date