2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000107510

Entity Name: WEST COAST INNOVATORS, INC.

FILED Apr 30, 2006 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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PO BOX 60547

ST PETERSBURG, FL 33784

Current Mailing Address: New Mailing Address:

PO BOX 60547

ST PETERSBURG, FL 33784

FEI Number: 20-3243787 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:

LODEN, SCOTT T LODEN, SCOTT T 5982 31ST AVENUE N 4601 CENTRAL AVENUE

ST PETERSBURG, FL FL US ST PETERSBURG, FL 33713 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: SCOTT T LODEN 04/30/2006

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: () Change () Addition

LODEN, SCOTT T Name: Name: PO BOX 60547 Address: Address: City-St-Zip: ST PETERSBURG, FL 33784 City-St-Zip:

Title: VP,S Title: (X) Change () Addition

() Delete Name: MURRAY, WAYNE Name: MURRAY, WAYNE 753 85TH AVENUE NO Address: PO BOX 60547 Address:

ST PETERSBURG, FL 33702 ST PETERSBURG, FL 33784 City-St-Zip: 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.

Ρ SIGNATURE: SCOTT T LODEN 04/30/2006