

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Matheman
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000067456 (2)

1. Corporation Name

WEST COAST MAINTENANCE & REPAIR, INC.



Principal Place of Business

**2550 26TH STREET WEST
BRADENTON FL 34205**

Mailing Address

**2550 26TH STREET WEST
BRADENTON FL 34205**

2. Principal Place of Business

2a. Mailing Address

21	State, Apt. #, etc.	26	State, Apt. #, etc.
22	City & State	27	City & State
23	Zip	28	Zip
24	Country	29	Country

9. Name and Address of Current Registered Agent

**CLINE, DART
2550 26TH STREET WEST
BRADENTON FL 34205**

3. Date Incorporated or Qualified 09/23/1993	3a. Date of Last Report 03/17/1995
4. FLE Number 65-0435177	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
85	Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1509, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Sections 607.0505, Florida Statutes.

SIGNATURE

Signature of Registered Agent (Print Name and Title)

Signature of Officer or Director (Print Name and Title)

Date

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CLINE, DART L	2. NAME	
STREET ADDRESS	2550 26TH STREET WEST	3. STREET ADDRESS	
CITY-STATE-ZIP	BRADENTON FL 34205	4. CITY-STATE-ZIP	
TITLE	STD	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MROZINSKI, CHERYL A.	2.2 NAME	HOWARD, CHERYL A.
STREET ADDRESS	2550 26TH STREET WEST	2.3 STREET ADDRESS	
CITY-STATE-ZIP	BRADENTON FL	2.4 CITY-STATE-ZIP	
TITLE	D	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SHRUM, TERRY L	3.2 NAME	
STREET ADDRESS	2550 26TH STREET WEST	3.3 STREET ADDRESS	
CITY-STATE-ZIP	BRADENTON FL 34205	3.4 CITY-STATE-ZIP	
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-STATE-ZIP		4.4 CITY-STATE-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-STATE-ZIP		5.4 CITY-STATE-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-STATE-ZIP		6.4 CITY-STATE-ZIP	

CHERYL GOT MARRIED!

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*****200.00**

14. I do hereby certify that the information supplied with this filing is true and correct. I am not qualified for the exemption stated in Section 119.07(5)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and correct and that my signature shall have the same legal effect as if made under oath, that I am an officer or director of the corporation or a member or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an affidavit with an address.

SIGNATURE: *Cheryl A. Howard* CHERYL A. HOWARD 3/14/96 (941) 751-1462

CR2E034 (12/95)