FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # **P94000076479 (2)**

1. Corporation Name
WEST COAST MOLD & ENGINEERING, INC.

Principal Place of Business
1928 LIMBUS AVENUE
SARASOTA FL 34243

Mailing Address
1928 LIMBUS AVENUE
SARASOTA FL 34243

2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified	3a. Date of Last Report
21 911 Commerce Blvd. N.	26 911 Commerce Blvd N.	10/13/1994	05/01/1995
22 State, Apt. #, etc.	27 State, Apt. #, etc.	4. FEI Number 65-0529890	☐ Applied For ☐ Not Applicable
23 City & State: Sarasota, Florida	28 City & State: Sarasota, FL	5. Certificate of Status Desired ☐	**$8.75** Additional Fee Required
24 Zip: 34243 25 Country: USA	29 Zip: 34243 30 Country: USA	6. Election Campaign Financing Trust Fund Contribution ☐	**$5.00** May Be Added to Fees
		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No	

9. Name and Address of Current Registered Agent

MANSFIELD, DOUG
1928 LIMBUS AVENUE
SARASOTA FL 34243

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 617.1502, 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, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1 TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MANSFIELD, DOUG 1928 LIMBUS AVENUE SARASOTA FL 34243 ☐ DELETE	1 TITLE / 2 NAME / 3 STREET ADDRESS / 4 CITY-ST-ZIP	☒ Change ☐ Addition 911 Commerce Blvd North Sarasota, FL 34243
1 TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MANSFIELD, LEE ANN 1928 LIMBUS AVENUE SARASOTA FL 34243 ☐ DELETE	2 TITLE / 2 NAME / 3 STREET ADDRESS / 4 CITY-ST-ZIP	☒ Change ☐ Addition 911 Commerce Blvd North Sarasota FL 34243
1 TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	3 TITLE / 2 NAME / 3 STREET ADDRESS / 4 CITY-ST-ZIP	☐ Change ☒ Addition V Bryan Mansfield 911 Commerce Blvd North Sarasota, FL 34243
1 TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	4 TITLE / 2 NAME / 3 STREET ADDRESS / 4 CITY-ST-ZIP	☐ Change ☒ Addition V Julie Bischoff 2712 Stratford Drive Sarasota, FL 34232
1 TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	5 TITLE / 2 NAME / 3 STREET ADDRESS / 4 CITY-ST-ZIP	☐ Change ☐ Addition
1 TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	6 TITLE / 2 NAME / 3 STREET ADDRESS / 4 CITY-ST-ZIP	☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate 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 the receiver 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 attachment with an address.

SIGNATURE: Doug Mansfield DOUG MANSFIELD 1-23-96 941-358-9022
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (12/95)