

P95000004088

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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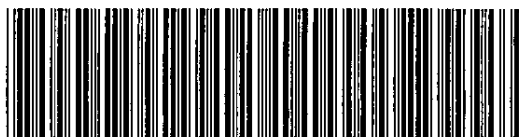
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

R.A. Chong

C. Coultette SEP 12 2007

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: WEST COAST PROPERTIES, INC.
(Name of Corporation)

DOCUMENT NUMBER: P 95000004088

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

CORINNE LAWRENCE
(Name of Contact Person)

WEST COAST PROPERTIES, INC.
(Firm/Company)

P.O. Box 1329
(Address)

TALHOSSESSA FL 33592
(City/State and Zip Code)

For further information concerning this matter, please call:

CORINNE LAWRENCE at (813) 978-9100
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH
FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of FLORIDA in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: WEST COAST PROPERTIES, INC.
2. The principal office address: NEW: 10710 ARROWHEAD LAKE CT.
THONOTOSASSA FL 33592
3. The mailing address (if different): SAME
4. Date of incorporation/qualification: JAN 1995 Document number: P95 00000 4088
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

CORINNE M. LAWRENCE
4821 E. BUSCH BLVD. Suite C
TAMPA FL 33617

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

CORINNE M. LAWRENCE
10710 ARROWHEAD LAKE CT.
(P.O. Box NOT acceptable)
THONOTOSASSA FL 33592

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The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

C. M. Lawrence
(Signature of an officer or director)

CORINNE M. LAWRENCE, Vice Pres.
(Printed or typed name and title)

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

C. M. Lawrence
(Signature of Registered Agent)

9-4-2007
(Date)

If signing on behalf of an entity:

CORINNE M. LAWRENCE
(Typed or Printed Name)

*** FILING FEE: \$35.00 ***