## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # **P95000077948** (4)

## WESTCOAST FINANCIAL MANAGEMENT CORPORATION

FILED
May 09 1997 8:00am
Secretary of State



Principal Plac	ce of Business	Mailing Add	Mailing Address 677 NORTH WASHINGTON BOULEVARD SARASOTA FL 34236-4241				1 METINER HE LATER STATE STATE STATE SENT SENT MENT 10010 SOME GROOT STATES			
677 NORTH W SARASOTA FL	ASHINGTON BOULEVARD 34236									
				٠			3. Date incorporated or Qualified 10/11/1995		ate of Last 06/1996	Report
2. Principal 6	Place of Business	2s. Mailing	Address				4. FEI Number			Applied For
21		26					65-0622887			lot Applicable
Suite, Apl	#, etc.	Suite, A	pt. #, etc.				5. Certificate of Status Desired		\$8.75	Additional
22		27					b. Certificate of Status Desired		Fee f	Required
City & Sta	le	City & S	State				6. Election Campaign Financing	_		D May Be
23		28					Trust Fund Contribution	_⊔		to Fees
Zpp ¬	Country	Zip		Coun	itry		8. This corporation has liability for			s. 199.032,
24	25 9. Name and Address of Curre	29		30			Florida Statutes  10. Name and Address of New Re	Yes	<del></del>	
		ant negistered Ag	Jenn -		BIT	Name	10. Name and Address of New Ne	gistered.	Manit	
	IBERLY, RONALD LEON			[		Harris				
	5 32ND STREET			[6	B2	Street Addr	ess (P.O. Box Number is Not Acceptat	ole)		
SAH	rasota Fl 34234			<u> </u>	B3					
				(	~					
				Ī	B4	City		FL	85 Zip	Code
44 0	the the second continue COZ OF	00 and 607 1600	Etorido Ctotuto	s the ab			eration autopile this statement for the			ita rapiatarad
office or	registered agent, or both, in the Stat	te of Florida. Such	change was a	uthorized	by	the corporat	poration submits this statement for the paint ion's board of directors. I hereby acce	ot the app	pointment a	is registered
agent. L	am familiar with, and accept the obli	igations of, Section	1607.0505, Flo	rida Statu	tes					-
SIGNATURE	Signature, lyseed or punited name of registered a	anni se di tele il appel apple	. Broto	Deglessed	À =	at almost we can de	red when reinstating)	DATE		
12.		ND DIRECTORS	i (iii)	13.	~ger	ir eiðustora sednir	ADDITIONS/CHANGES TO OFFIC		DIRECTO	RS IN 12
TOTLE	P		DELETE	1.1 1011	 .E				Change	
NAME	WIMBERLY, RONALD LEON			1.2 NAM	AF.	Ì				
STREET ADDRESS	AAAR AANID ATDEET					ADDRESS				
City-St-7iP	SARASOTA FL 34234			1.4 CITY		····· }				
TITLE	S		DELETE	2.1 7171	~~~	<del></del>			Change	Addition
NAME	WIMBERLY, JANET ELAINE			2.2 NAN	ΜE					
STREET ADDRESS	AGAP AGAIN ATREET			2.3 STR	EET A	ADDRESS				
CITY-ST-ZIP	SARASOTA FL 34234			2. 4 CIT						
1816			DELETE	3.1 T(T)					Change	Addition
NAME				3.2 NAA	Æ	1				
STREET ADDRESS				3.3 STR	EET A	ADDRESS .				
CITY- ST-ZIP				3 4. CIT	Y - 51	T-ZIP				
TITLE			DELETE	4.1 TITL	.E	7			Change	Addition
NAME				4. 2 NA	ME					
STREET ADDRESS				4.3 STR	EET /	ADDRESS				
City St-7P				4.4 CIT	Y-\$T	1-Z1P				
THE			DELETE	5.1 TITE	LE				Change	Addition
NAME				5.2 NAN	νE					
STREET ADDRESS				5.3 STR	EET I	address				
CITY-S1-ZIF				5.4 CITY	Y-ST	E-ZIP				
TITLE			DELETE	61 THTL	.E	- T			☐ Change	Addition
NAME				6.2 NAM	ME					
STREET ADDRESS				6.3 STR	EET /	ADORESS				
CITY - S1 - ZIP	1			6.4 CIT	Y-ST	T- ZIP				

14. If do hereby certify that the information supplied with this filing 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:

Rorald Keon Windberly SIGNATURE AND TYPED ON PRINTED HAME OF SIGNING OFFICER OR DIRECTOR

4/28/97 (GUI) 952-5851