

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000056903

FILED
Mar 29, 2004
Secretary of State

Entity Name: WEST COAST WINE CLUBS INC.

Current Principal Place of Business:

3310 W BAY TO BAY BLVD SUITE 101
TAMPA, FL 33629

New Principal Place of Business:

Current Mailing Address:

3624 NW 97 BLVD
GAINESVILLE, FL 32606

New Mailing Address:

FEI Number: 59-3394901

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DORN, THOMAS C
3624 NW 97TH BLVD
GAINESVILLE, FL 32606 US

Name and Address of New Registered Agent:

DORN, MELINDA
3624 NW 97TH BLVD
GAINESVILLE, FL 32606 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: MELINDA DORN

03/29/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: DORN, MELINDA P
Address: 3624 NW 97 BLVD
City-St-Zip: GAINESVILLE, FL 32606

Title: S () Delete
Name: DORN, THOMAS C
Address: 3624 NW 97TH BLVD
City-St-Zip: GAINESVILLE, FL 32606

Title: P () Delete
Name: ALBERDI, TIM
Address: 3310 BAY TO BAY BLVD
City-St-Zip: TAMPA, FL 33629

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: DORN, MELINDA
Address: 3624 NW 97 BLVD
City-St-Zip: GAINESVILLE, FL 32606

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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.

SIGNATURE: MELINDA DORN

VP

03/29/2004

Electronic Signature of Signing Officer or Director

Date