SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT QUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P96000074362 (0)

WESTCOAST SERVICES OF PINELLAS COUNTY, INC.

Principal Place of Business

Mailing Address

APPROVED PY, 1062

97 OCT 22 AM 8: 33

SECRETARY OF STATE TALLAHASSEE, FLORIDA



106 AMANDA CANE 106 AMANDA LANE OLDSMAR FL 34677 OLDSMAR FL 34677 DO NOT WRITE IN THIS SPACE 3a. Date of Last Report 3. Date Incorporated or Qualified 09/04/1996 2. Principal Place of Business 21 8800 494 St Mailing Address Applied For 21 26 Not Applicable Suite, Apt. #, etc.
SuiTE Suite, Apt. #, etc. \$8.75 Additional Certificate of Status Desired 27 Fee Required City & State 6. Election Campaign Financing \$5.00 May Be 28 Trust Fund Contribution Added to Fees Country This corporation owes or has paid the current year Intangible 29 30 Personal Property Tax due June 30. Yes ΠNo ddress of Current Registered Agent 9. Name and 10. Name and Address of New Registered Agent COX, BONNIE 81 Name **106 AMANDA LANE** 82 Street Address (P.O. Box Number is Not Acceptable) OLDSMAR FL 34677 83 84 City 85 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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** Signature, typod or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 12 FFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (4/97 TITLE DELETE 1.1 TITLE Change Addition BONNIE M. COX 4701-884 AVEN. NAME 1.2 NAME STREET ADDRESS 1.3 STREET ADDRESS CITY-ST-ZIF 1.4 CITY-ST-ZIP TITLE DELETE 2.1 THLE ☐ Change Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY - ST - ZIP TITLE DELETE 3.1 TITLE ☐ Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP \* 3.4. CITY- \$1-7IP DELETE TITLE 4.1 TITLE ☐ Change Addition 800002329648---10/27/97--01003--004 \*\*\*\*165.00 \*\*\*\*165,1 NAME 4. 2 NAME ---{ STREET ADDRESS 4.3 STREET ADDRESS .005-\*\*\*\*165.00 Addition CITY-ST-7IP 4.4 CITY-ST-ZIP DELETE TUTLE 5.1 101.6 Change NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE TITLE Change 6.1 TITLE Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY - ST - ZIP

14. I 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.

## WESTCOAST SERVICES OF PINELLAS CO. INC.

8800 49th Street North • Pinellas Park, FL 53782, Suite 412 • (813) 547-1710

July 18, 1997

To Ithon it may concern:

Please be between that we have believe before Dept of 1996. Also be believed that the is the first source that we have received. Check for 250 00 (Soo hundred fifty dollars endered).

Hark you, Januar et Cox

Julianed again

July a with new Check for \$165.000

uplaces Check for 250 00