2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P96000104201

Entity Name: WEST COAST PAINTING, INC.

FILED Sep 28, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

4860 SYCAMORE DR. NAPLES, FL 34119 US

Current Mailing Address: New Mailing Address:

2316 PINE RIDGE RD #432 NAPLES, FL 34109

FEI Number: 59-3443133 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ALEMAN, ANA L
4860 SYCAMORE DR.
NAPLES, FL 34119 US
ALEMAN, FRANCIS M
4860 SYCAMORE DR.
NAPLES, FL 34119 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: FRANCIS ALEMAN 09/28/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition ALEMAN, ANA L PRES. ALEMAN, FRANCIS PRES. Name: Name: 4860 SYCAMORE DR 4860 SYCAMORE DR Address: Address: City-St-Zip: NAPLES, FL 34119 US City-St-Zip: NAPLES, FL 34119 US

Title: V. P (X) Delete Title: () Change () Addition

 Name:
 ALEMAN, FRANCIS M V. PRES
 Name:

 Address:
 4860 SYCAMORE DR.
 Address:

 City-St-Zip:
 NAPLES, FL 34119 US
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: FRANCIS ALEMAN PRES 09/28/2009

Electronic Signature of Signing Officer or Director

Date