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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

1999

DOCUMENT # p98000033083 \ 1. Corporation Name

WEST COAST PARTNERS, INC.

Principal Place of Business

Mailing Address

SAME

13575 58th Street N Suite 144/The Summit Bldg.

Clearwater, FL 33760

FILED May 17, 1999 8:00 am Secretary of State

05-17-1999 90093 046 ***150.00

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

							4/7/98			
2. Principal F	Place of Business	2a	. Mailing Address				4. FEI Number		pplied For	
21		26					74-2876162		lot Applicable	
Suite, Apt.	#, etc.		Suite, Apt. #, etc.				<u> </u>	\$8.75	Additional	
22		27					5. Certificate of Status Desired	Fee F	Required	
City & Stat	te		City & State		_		6. Election Campaign Financing	\$5.00	May Be	
23		28					Trust Fund Contribution	•	to Fees	
Zip	Country	120	Zip	Countr	_		8. This corporation owes the current year Intang			
24	25	29	`		•		· · · · · · · · · · · · · · · · · ·	l Yes	□No	
24 25 29 30 9. Name and Address of Current Registered Agent					_		10. Name and Address of New Registered Age			
	o. Hamo and Abaress of Carrett	<u></u>		81	ī	Name	10. 110 0 (10 10 10 10 10 10 10			
Jeffries, David M. Esq.										
· · · · · · · · · · · · · · · · · · ·					82 Street Address (P.O. Box Number is Not Acceptable)					
220 S. Franklin Street										
Tamp	pa, FL 33602			83	1					
				84	╁	City		35 Zip	Code	
Ĭ				184	1	City	FL	אים ופי	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.										
agent. ra	im familiar with, and accept the obligation	ns ot,	Section 607.0505, Florid	a Statutes	5.				:	
SIGNATURE			F 11		_		ired when reinstating) DATE			
12.	Signature, typed or printed name of registered agent at OFFICERS AND			13.	erat :	signature require	ADDITIONS/CHANGES TO OFFICERS AND [NOECT	OBS IN 12	
TITLE		DIKE	DELETE		_			Change		
	President		□ vereie	1.1 TITLE			L	Johange	Addition	
NAME	Dennis D. Bradford				1.2 NAME				ł	
STREET ADDRESS	STREET ADDRESS 13575 58th Street N #144				1.3 STREET ADDRESS					
CITY-ST-ZIP	Clearwater, FL 33	76	0	1.4 CITY-8	ST-	.ZIP				
TITLE	Manager		☐ DELETE	2.1 TITLE				Change	☐ Addition	
NAME	Joseph G. Lubeck			2.2 NAME					j	
STREET ADDRESS	13575 58th Street	N	#144	2.3 STREE	ŦΑ	ADDRESS (
CITY-ST-ZIP	Clearwater, FL 33			2.4 CITY-						
TITLE	Clearwater, FB 33	10	☐ DELETE	3.1 TITLE	31-	-24		Change	☐ Addition	
] 0.7690		
NAME				3.2 NAME						
STREET ADDRESS				3.3 STREE	TA	(DDRESS				
CITY-ST-ZIP				3.4. CITY-	ST-	-ZIP	· · · · · · · · · · · · · · · · · · ·			
TITLE			☐ DELETE	4.1 TITLE		Ì] Change	Addition	
NAME				4. 2 NAME					1	
STREET ADDRESS			i	4.3 STREE	TΑ	ADDRESS				
CITY-ST-ZIP				4.4 CITY-S	T-2	ZIP			- 1	
TITLE			☐ DELETE	5.1 TITLE				Change	Addition	
NAME				5.2 NAME		Ì		-	-	
				5.3 STREE	TΔ	LODRESS				
STREET ADDRESS									1	
CITY-ST-ZIP			□ cc: c==	5.4 CITY-S 6.1 TITLE	1-4	ZIP	··	1.05		
TITLE			☐ DELETE				L] Change	☐ Addition	
NAME				6.2 NAME						
STREET ADDRESS				6.3 STREE	TΑ	(DDRESS			l	
1									I	

14. I 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, with all other like empowered.

SIGNATURE:

Dennis D. Bradford, Pres. 4/29/99 (727)538-770

Daytime Phone #

CR2E034 (11/98)