2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000022971

1. Entity Name

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME STREET ADDRESS

WEST COAST ARCHITECTURAL PRE-CAST, INC.

| Principal Place of Business | an ericak i rainte | . Mailing Address | ş . | 5***** | ه د رسي | | | | |
|---|--|---|------------------------------------|--|----------------------|--|----------------|---------------------------|------------------|
| 09 SEABOARD AVE. /ENICE FL 34292 | | 109 SEABOARD AVE. VENICE FL 34292-2616 | | | | ± 5° ≠2 | | | |
| 2. Principal Place of Business | | 3. Mailing Address | | | | | | | |
| 2. Thropar Flace of Basiness | | P.O. Box | 641 | | | : | | # 1484# 16141 198 | 181 i 181 i 1881 |
| Suite, Apt. #, etc. Suite, Apt. #, etc. | | | | DO NOT WRITE IN THIS SPACE | | | | | |
| City & State | City & State H | | | 4. FEI Number Applied Fo | | | | plied For t Applicable | |
| Zip Co | untry | 342 8 4 | Country | A | 5. Certificate | of Status Desired | | 8.75 Add ee Required | |
| 6. Name and | Address of Current Re | gistered Agent | | | 7. Name and | Address of New R | egistered A | gent | |
| | | | | Name | | | | | |
| JOHNSON, SHERRI L 330 S. ORANGE AVE. SARASOTA FL 34236 | | | - | Street Address (P.O. Box Number is Not Acceptable) | | | | | |
| SANASOTA FL 3423 | 9 | | - | City | | | FL | Zip Code | |
| Signature, typed or printe Signature, typed or printe This corporation is eligible to | d name of registered agent and satisfy its Intangible | FILE NOW | !!! FEE IS | • | | ction Campaign Fin | DATE | <u></u> | 0 May Be |
| Tax filing requirement and ele (See criteria on back) | After MAY 1, 2000 Fee will be \$550.00 Make Check Payable to Department of St | | | Trus | st Fund Contribution | ~ ~ | | to Fees | |
| 1 | OFFICERS AND DIF | RECTORS | 12. | | ADDITIONS/0 | CHANGES TO OFFI | CERS AND | DIRECTORS | SIN 11 |
| ITLE D IAME KILLOREN, VA TREET ADDRESS 109 SEABOAR ITY-ST-ZIP VENICE FL 34: | D AVE. | ☐ Delete | TITLE NAME STREET CITY-SI | ADDRESS 1-71P | ERIE R Seabon | Killor Hoe 342 | 2 | Change | ☐ Addition |
| ITLE | | ☐ Delete | TITLE | ₽ | ~~~ , (• | | - | ☐ Change | Addition |
| IAME ETREET ADDRESS (ETY-ST-ZIP | | | NAME STREET CITY-ST | ADDRESS 109 | Seabour | RIGANDI DAVE. | 00.3 | | , - |
| TILE | | | TITLE | S/T | mce-, (| ~ 34 | 07 of | Change | Addition |
| IAME STREET ADDRESS CITY-ST-ZIP | | | NAME STREET CITY-SI | ADDRESS 709 | Seaboa | KILLOR Ave | EN SO | | <i>,</i> ` |
| ITLE | | ☐ Delete | TITLE NAME | Ve | in ce , " | 7C 540 | ~7_ <i>d</i> _ | ☐ Change | Addition |

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

CITY-ST-ZIP

TITLE

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NOVEMBER 1 REPORTED IN

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hugen 04/07/00 (94

(94) 485-487

Change

☐ Change

Addition

☐ Addition

Apr 14, 2000 8:00 am Secretary of State

04-14-2000 90006 004 ***150.00