# FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JAN 19 AM 10:07

DOCUMENT # S07151 (1)

1. Corporation Name
WEST COAST EMPLOYERS ASSOCIATION, INC.

| Principal Place of Business | Mailing Address |
|---|---|
| ~~1408 N WESTSHORE BLVD.~~<br>~~SUITE 1006~~<br>~~TAMPA FL 33607~~ | ~~1408 N WESTSHORE BLVD.~~<br>~~SUITE 1005~~<br>~~TAMPA FL 33607~~ |

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 09/28/1990
3a. Date of Last Report: 06/10/1994

| 2. Principal Place of Business | 2a. Mailing Address |
|---|---|
| 21 600 N.Westshore Blvd. | 26 600 N.Westshore Blvd. |
| Suite, Apt. #, etc.<br>22 Suite 201 | Suite, Apt. #, etc.<br>27 Suite 201 |
| City & State<br>23 Tampa, FL | City & State<br>28 Tampa, FL |
| Zip 24 33609 Country 25 Hillsbor. | Zip 29 33609 Country 30 Hillsbor. |

4. FEI Number: 59-2589950 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

| 9. Name and Address of Current Registered Agent | 10. Name and Address of New Registered Agent |
|---|---|
| JOHNSON, BRADLEY R.<br>~~1408 N WESTSHORE BLVD.~~<br>~~SUITE 1000~~<br>~~TAMPA FL 33607~~ | 81 Name<br>82 Street Address (P.O. Box Number is Not Acceptable) 600 N. Westshore Blvd.<br>83 Suite 200<br>84 City Tampa FL 85 Zip Code 33609 |

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
|---|---|---|---|
| TITLE | VD | 11 TITLE | ☐ Change ☐ Addition |
| NAME | WELSH, NORMAN, JR. | 12 NAME | |
| STREET ADDRESS | 4801 ULMERTON RD | 13 STREET ADDRESS | |
| CITY-ST-ZIP | CLEARWATER FL | 14 CITY-ST-ZIP | |
| TITLE | VD | 21 TITLE | ☐ Change ☐ Addition |
| NAME | BURRIS, DALE | 22 NAME | |
| STREET ADDRESS | 4726 EISENHOWER BLVD. | 23 STREET ADDRESS | |
| CITY-ST-ZIP | TAMPA FL | 24 CITY-ST-ZIP | |
| TITLE | VD | 31 TITLE | ☐ Change ☐ Addition |
| NAME | COLLINS, JERRI | 32 NAME | |
| STREET ADDRESS | 16529 FOOTHILL DR | 33 STREET ADDRESS | |
| CITY-ST-ZIP | TAMPA FL | 34 CITY-ST-ZIP | |
| TITLE | PD | 41 TITLE | ☐ Change ☐ Addition |
| NAME | COLLINS, WHIT | 42 NAME | |
| STREET ADDRESS | ~~1408 N WESTSHORE BLVD~~ | 43 STREET ADDRESS | 600 N. Westshore Blvd., Suite 201 |
| CITY-ST-ZIP | TAMPA FL | 44 CITY-ST-ZIP | Tampa, FL 33609 |
| TITLE | VD | 51 TITLE | ☐ Change ☐ Addition |
| NAME | RIGANO, DONALD | 52 NAME | |
| STREET ADDRESS | 4208 HARBOR HOUSE DR. | 53 STREET ADDRESS | |
| CITY-ST-ZIP | TAMPA FL | 54 CITY-ST-ZIP | |
| TITLE | VT | 61 TITLE | ☐ Change ☐ Addition |
| NAME | ROSENWASSER, MARC | 62 NAME | |
| STREET ADDRESS | 4606 PLAYERS COURT | 63 STREET ADDRESS | |
| CITY-ST-ZIP | TAMPA FL | 64 CITY-ST-ZIP | |

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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.

SIGNATURE: Whit Collins, President 1/13/95 (813)289-6518
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0203112 CP