2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR).

FILED
Mar 14, 2005 8:00 am
Secretary of State
03-14-2005 90089 018 ***158.75

DOCUMENT # S07151

1. Entity Name

WEST COAST EMPLOYERS ASSOCIATION, INC.

Principal Place of Business	Mailing Address
5005 W. LAUREL ST. STE 206 TAMPA FL 33607 US	5005 W. LAUREL ST. STE 206 TAMPA FL 33607 US

1st MOORE CR2E034 (10/04)

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

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

5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

MILLER, FELICIA
5005 W. LAUREL ST.
STE 206
TAMPA FL 33607

7. Name and Address of New Registered Agent

Name: Mercedes Suarez-Solar, MS, PSY
Street Address (P.O. Box Number is Not Acceptable): 5005 West Laurel St. Ste. 206
City: TAMPA FL Zip Code: 33607

8. 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. I am familiar with, and accept the obligations of registered agent.

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

FILE NOW!!! FEE IS $150.00
After May 1, 2005 Fee Will Be $550.00
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P SUAREZ-SOLAR, EDUARDO A. 600 N. WESTSHORE BLVD, SUITE 201 TAMPA FL 33609	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	President SUAREZ-SOLAR, Eduardo 15720 Berea Drive TAMPA FL 33556	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S BELLO, JOSE 9312 ROCKPORT PLACE TAMPA FL 33626	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP. SUAREZ-SOLAR, Mercedes T. 15720 Berea Drive TAMPA, FLA 33556	☒ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP CHARLSON, STUART 6711 TANGLEWOOD DR. N.E. ST PETERSBURG FL 33702	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ 3-9-05
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #