

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000082036

Entity Name: WEST COAST MED LLC

Current Principal Place of Business:

2033 WOOD ST.
#210
SARASOTA, FL 34237

Current Mailing Address:

BOX 1619
LARGO, FL 33779

FEI Number: 47-3975199

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KANTZLER, MARK G
2033 WOOD ST.
#210
SARASOTA, FL 34237 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:

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name KANTZLER, MARK G
Address BOX 1619
City-State-Zip: LARGO FL 33779

I hereby 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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MARK KANTZLER

MGR

04/07/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date