

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 29, 2007 08:00 AM
Secretary of State

DOCUMENT # F00000004539
 1. Entity Name
 WHEELCHAIR FOUNDATION, INC.



Principal Place of Business 3820 BLACKHAWK ROAD DANVILLE, CA 94506-4617	Mailing Address 3820 BLACKHAWK ROAD DANVILLE, CA 94506-4617
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01082007 No Chg-NP CR2E037 (4/06)

4. FEI Number 94-3353881	Applied For Not Applicable
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5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent
 KALINOSKI, SHARON
 2131 HOLLYWOOD BLVD STE 505
 HOLLYWOOD, FL 33020-6753

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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)

Filing Fee is \$61.25
Due by May 1, 2007

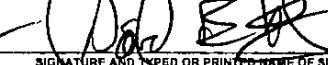
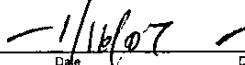
9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BEINKE, STEPHEN 3820 BLACKHAWK ROAD DANVILLE, CA 94506
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BEHRING, DAVID E 3820 BLACKHAWK ROAD DANVILLE, CA 945064617
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VDT CALLISON, EARL J 376 SHIRE OAK CT LAFAYETTE, CA 94549
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LEWIS, CHRISTOPHER J 9000 CROW CANYON ROAD S-133 DANVILLE, CA 94506
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD RUDD, CHRISTOPHER L 2055 E PACIFIC COAST HWY MALIBU, CA 90265
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD BEHRING, KENNETH E 3820 BLACKHAWK RD DANVILLE, CA 94506

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01/31/07-80030-017 61.25

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 recipient trustee empowered to execute this report as required by Chapter 617, 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:  **DAVID E. BEHRING** 
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date 1/16/07 Daytime Phone #