

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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FILED
Mar 15, 2010
Secretary of State

Entity Name: WESTCARE FOUNDATION, INC.

Current Principal Place of Business:

900 GRIER DRIVE
LAS VEGAS, NV 89119

New Principal Place of Business:

Current Mailing Address:

PO BOX 94738
LAS VEGAS, NV 89193

New Mailing Address:

FEI Number: 86-0852629

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BUSINESS FILINGS INCORPORATED
1203 GOVERNORS SQUARE BLVD, SUITE 101
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: PCEO
Name: STEINBERG, RICHARD
Address: 900 GRIER DRIVE
City-St-Zip: LAS VEGAS, NV 89119

Title: VC
Name: PORTER, BILL
Address: 820 E BEALE STREET
City-St-Zip: KINGMAN, AZ 86401

Title: VC
Name: WALSH, TOM
Address: 180 28TH AVENUE NORTH
City-St-Zip: ST PETERSBURG, FL 33704

Title: AS
Name: VENTRELLA, PETER
Address: 900 GRIER DRIVE
City-St-Zip: LAS VEGAS, NV 89119

Title: T
Name: BOAZMAN, DERRICK
Address: 1860 BOND DRIVE
City-St-Zip: ATLANTA, GA 30315

Title: C
Name: WADHAMS, JIM
Address: 3773 HOWARD HUGES PKWY 3RD FL SOUTH
City-St-Zip: LAS VEGAS, NV 89169

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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: PETER VENTRELLA

AS

03/15/2010

Electronic Signature of Signing Officer or Director

Date