

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000007244

FILED
Jan 16, 2006
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: PCD () Delete
Name: STEINBERG, RICHARD
Address: 900 GRIER DRIVE
City-St-Zip: LAS VEGAS, NV 89119

Title: VD () Delete
Name: CASSINGER, MARY
Address: 2950 S INDUSTRIAL ROAD
City-St-Zip: LAS VEGAS, NV 89109

Title: ST () Delete
Name: KING, TEX
Address: 404 LEICHANN ROAD
City-St-Zip: HENDERSON, NV 89015

Title: DAS () Delete
Name: VENTRELLA, PETER
Address: 900 GRIER DRIVE
City-St-Zip: LAS VEGAS, NV 89119

Title: D () Delete
Name: THOMAS, DICK
Address: 11584 GLOWING SUNSET
City-St-Zip: LAS VEGAS, NV 89135

Title: D () Delete
Name: SULLIVAN, WILLIAM
Address: 7820 RAMBLEWOOD AVE
City-St-Zip: LAS VEGAS, NV 89104

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: STEINBERG, RICHARD
Address: 900 GRIER DRIVE
City-St-Zip: LAS VEGAS, NV 89119

Title: CD (X) Change () Addition
Name: CASSINGER, MARY
Address: 2950 S INDUSTRIAL ROAD
City-St-Zip: LAS VEGAS, NV 89109

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: C (X) Change () Addition
Name: WADHAMS, JIM
Address: 3773 HOWARD HUGES PKWY 3RD FL SOUTH
City-St-Zip: LAS VEGAS, NV 89109

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: PETER VENTRELLA

EVP

01/16/2006

Electronic Signature of Signing Officer or Director

Date