


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 13, 2006 08:00 AM
Secretary of State

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| DOCUMENT # N00000002996 |  |
| 1. Entity Name CARE FOR WHEAT, INC. | |

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| Principal Place of Business 2828 BANCHORY ROAD WINTER PARK, FL 32792 | Mailing Address 2828 BANCHORY ROAD WINTER PARK, FL 32792 |
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DO NOT WRITE IN THIS SPACE



01062006 No Chg-NP CR2E037 (11/05)

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| 4. FEI Number NOT APPLICABLE | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |

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| 6. Name and Address of Current Registered Agent GARDNER, WALTER G 2828 BANCHORY ROAD WINTER PARK, FL 32792 | DO NOT WRITE IN THIS SPACE |
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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 _____ (NOTE: Registered Agent signature required when reinstating) **DATE** _____

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| Filing Fee is \$61.25 Due by May 1, 2006 | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees |
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| 10. OFFICERS AND DIRECTORS | |
|--|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D FINK, LORRAINE A 1912 N WASHINGTON ST, APT 2 BISMARCK, ND 58501 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D GARDNER, EILEEN M 2828 BANCHORY ROAD WINTER PARK, FL 32792 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D GARDNER, WALTER C 2828 BANCHORY ROAD WINTER PARK, FL 32792 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |

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01/18/06-80048-01061.25

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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 receiver or 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: Walter C. Gardner **January 04, 2006** - **(407) 342-4988**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #