

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000008581

FILED
Apr 29, 2006
Secretary of State

Entity Name: A WOMAN'S TOUCH IN HEALTH CARE, INC.

Current Principal Place of Business:

119 W PLYMOUTH AVE
DELAND, FL 32720

New Principal Place of Business:

Current Mailing Address:

119 W PLYMOUTH AVE
DELAND, FL 32720

New Mailing Address:

FEI Number: 43-1991154

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VAUGHEN, DANIEL R ESQUIRE
1485 PERIWINKLE DRIVE
DELAND, FL 32724 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: EX D () Delete
Name: KENNEDY, KAREN
Address: 211 EAST VOORHIS AVE.
City-St-Zip: DELAND, FL 32720 US

Title: BC () Delete
Name: RAE, GUEN
Address: 1089 TORCHWOOD DRIVE
City-St-Zip: DELAND, FL 32724 US

Title: S () Delete
Name: THORNTON, CINDY
Address: 149 ROSEWOOD AVENUE
City-St-Zip: ORMOND BEACH, FL 32174

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: BC (X) Change () Addition
Name: RAE, GUENEVERE
Address: 1089 TORCHWOOD DRIVE
City-St-Zip: DELAND, FL 32724 US

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

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: GUENEVERE RAE

BC

04/29/2006

Electronic Signature of Signing Officer or Director

Date