

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000008014

FILED  
Apr 26, 2006  
Secretary of State

Entity Name: TWAFA-WECARE RESOURCES, INC.

**Current Principal Place of Business:**

C/O JANE W. MCMILLAN  
ONE SOUTHEAST THIRD AVE  
MIAMI, FL 33131

**New Principal Place of Business:**

**Current Mailing Address:**

C/O JANE W. MCMILLAN  
ONE SOUTHEAST THIRD AVE  
MIAMI, FL 33131

**New Mailing Address:**

FEI Number: 20-0231822      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MCMILLAN, JANE W  
STOKES MCMILLAN & MARACINI P.A.  
ONE SOUTHEAST THIRD AVE  
MIAMI, FL 33131 US

**Name and Address of New Registered Agent:**

MCMILLAN, JANE W  
STOKES MCMILLAN MARACINI & ANTUNEZ P.A.  
ONE SOUTHEAST THIRD AVE  
MIAMI, FL 33131 US

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: JANE W. MCMILLAN      04/26/2006  
\_\_\_\_\_  
Electronic Signature of Registered Agent      Date

**OFFICERS AND DIRECTORS:**

Title: D      ( ) Delete  
Name: GAUNTT, MILES  
Address: 3140 NE 23RD AVE.  
City-St-Zip: LIGHTHOUSE POINT, FL 33064

Title: D      ( ) Delete  
Name: MCGUIRE, NANCY  
Address: 12085 CHAPARRAL DR.  
City-St-Zip: BRIDGETON, MO 63044

Title: D      ( ) Delete  
Name: GIBBONS, JEANNE  
Address: 311 JACKSON ST.  
City-St-Zip: ST. CHARLES, MO 63044

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

Title: D      (X) Change ( ) Addition  
Name: MCCANN, SHEILA  
Address: 694 CEDAR RIDGE  
City-St-Zip: BALLWIN, MS 63021

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: MILES GAUNTT      D      04/26/2006  
\_\_\_\_\_  
Electronic Signature of Signing Officer or Director      Date