2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2006
Secretary of State

DOCUMENT# N04000006539

Entity Name: CENTRAL CARE , INC.

Current Principal Place of Business:

137 MILEHAM DRIVE
ORLANDO, FL 32835

New Principal Place of Business:

Current Mailing Address:

137 MILEHAM DRIVE
ORLANDO, FL 32835

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

MORRIS, LYNTON
10151 UNIVERSITY BLVD
345
ORLANDO, FL 32817 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: P ( ) Delete
Name: ELAINE, MORRIS
Address: 137 MILEHAM DR
City-St-Zip: ORLANDO, FL 32835

Title: VP ( ) Delete
Name: MORRIS, A L
Address: 137 MILEHAM DR
City-St-Zip: ORLANDO, FL 32835

Title: S ( ) Delete
Name: PHOLLIPS, VERONICA
Address: 137 MILEHAM DR
City-St-Zip: ORLANDO, FL 32835

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change ( ) Addition
Name: MORRIS, A L
Address: P.O. BOX 683345
City-St-Zip: ORLANDO, FL 32868

Title: S (X) Change ( ) Addition
Name: PHOLLIPS, VERONICA
Address: P. O. BOX 580038
City-St-Zip: ORLANDO, FL 32858

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: E MORRIS P 04/28/2006

Electronic Signature of Signing Officer or Director — Date