2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000088515

Entity Name: GERIATRX CARE, INC.

FILED Apr 24, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1050 S.E. MONTEREY ROAD 1050 S.E. MONTEREY ROAD

#202

STUART, FL 34994 STUART, FL 34994

Current Mailing Address: New Mailing Address:

1050 S.E. MONTEREY ROAD 1050 S.E. MONTEREY ROAD

201 #202 STUART, FL 34994 STUART, FL 34994

FEI Number: 65-1043673 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

GIL, WALTER R
1050 S.E. MONTEREY ROAD
1050 S.E. MONTEREY ROAD
1050 S.E. MONTEREY ROAD

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: WALTER R. GIL 04/24/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Name: GIL, WALTER R Name: GIL, WALTER R

Address: 1050 S.E. MONTEREY ROAD Address: 1050 S.E. MONTEREY ROAD #202

City-St-Zip: STUART, FL 34994 City-St-Zip: STUART, FL 34994

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WALTER R. GIL P 04/24/2006