2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2005
Secretary of State

DOCUMENT# P99000028770

Entity Name: WE CARE OF THE TREASURE COAST, INC.

Current Principal Place of Business:

1532 SE VILLAGE GREEN DR
UNIT P
PORT SAINT LUCIE, FL 34952

New Principal Place of Business:

8858 S. US HWY 1
PORT SAINT LUCIE, FL 34952

Current Mailing Address:

1532 SE VILLAGE GREEN DR
UNIT P
PORT SAINT LUCIE, FL 34952

New Mailing Address:

8858 S US HWY 1
PORT SAINT LUCIE, FL 34952

FEI Number: 65-0915285 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BARAKOS, HARALAMBOS
3340 SE FEDERAL HIGHWAY # 209
STUART, FL 334974900 US

Name and Address of New Registered Agent:

BARAKOS, HARALAMBOS
6445 NW HOPE CT.
PORT SAINT LUCIE, FL 34986 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: HARALAMBOS BARAKOS 05/02/2005
Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: BARAKOS, HARALAMBOS
Address: 1532 SE VILLAGE GREEN DR. UNIT P
City-St-Zip: PORT SAINT LUCIE, FL 34952

Title: V ( ) Delete
Name: BARAKOS, PAULA
Address: 1532 SE VILLAGE GREEN UNIT P
City-St-Zip: PORT SAINT LUCIE, FL 34952

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: BARAKOS, HARALAMBOS
Address: 6445 NW HOPE CT.
City-St-Zip: PORT SAINT LUCIE, FL 34986

Title: V (X) Change ( ) Addition
Name: BARAKOS, PAULA
Address: 6445 NW HOPE CT.
City-St-Zip: PORT SAINT LUCIE, FL 34986

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: PAULA BARAKOS VP 05/02/2005
Electronic Signature of Signing Officer or Director Date