No. **C 124917**	**Due no later than Jul 31, 2006**	2. Registered Agent and Address **(NO PO BOX)**
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 **NO FILING FEE IF RECEIVED BY DUE DATE**	**Annual Report Form** **1. Mailing Address: Correct in this box if needed.** WYNN'S EXTENDED CARE, INC. DIANE SPENCER-GRAB 6303 BLUE LAGOON DR STE 225 MIAMI FL 33126-6004	CT CORPORATION SYSTEM 300 N 6TH ST BOISE ID 83702 3. New Registered Agent Signature:*

4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).

Office Held	Name	Street or PO Address	City	State	Country	Postal Code
PRESIDENT	R STEVEN BROOKS	6303 BLUE LAGOON DR SUITE 225	MIAMI	FL	USA	33126-6004
SECRETARY	SCOTT K AMBLER	6303 BLUE LAGOON DR SUITE 225	MIAMI	FL	USA	33126-6004
DIRECTOR	R STEVEN BROOKS	6303 BLUE LAGOON DR SUITE 225	MIAMI	FL	USA	33126-6004

5. Organized Under the Laws of:	6. Annual Report must be signed.*	
CALIFORNIA **C 124917**	Signature: SCOTT K. AMBLER	Date: 07/10/2006
	Name (type or print): SCOTT K. AMBLER	Title: SECRETARY

Processed 07/10/2006

* Electronically provided signatures are accepted as original signatures.