

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 05, 2005 08:00 AM
Secretary of State

DOCUMENT # F04000001692 1. Entity Name HEATH CONSULTANTS INCORPORATED	
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Principal Place of Business 9030 MONROE ROAD HOUSTON, TX 77061	Mailing Address 9030 MONROE ROAD HOUSTON, TX 77061
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04292005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 04-2144731	Applied For ☐ Not Applicable
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5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent INCorp SERVICES, INC. 103 NORTH MERIDIAN ST. TALLAHASSEE, FL 32301
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DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable

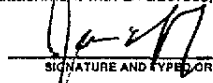
**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CT HEATH, MILTON W JR 80 OLD ORCHARD ROAD SHERBORN, MA 01770
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP MIDGLEY, GRAHAM 5831 MOUNTAIN VIEW DRIVE KINGWOOD, TX 77345
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D EYNON, STUART 11 FRANKLAND ROAD ASHLAND, MA 01721
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP HUFFMAN, JAMES 9030 MONROE ROAD HOUSTON, TX 77061
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S MONROE, M. VANCE 5 PATRICIA ROAD FRAMINGHAM, MA 01701
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000362788 05/05/05-80133-008 150.00 DO NOT WRITE IN THIS SPACE
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **4/29/05** **(713)844-1300**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #