2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 22, 2001 8:00 am
Secretary of State
05-22-2001 90634 042 ***150.00

DOCUMENT # F96000002892

1. Entity Name

NATIONAL HEALING CORPORATION

Principal Place of Business	Mailing Address
1900 CORPORATE BLVD NW ~~300 W~~ BOCA RATON FL 33431 US	1900 CORPORATE BLVD NW ~~100W~~ BOCA RATON FL 33431 US

A0071209

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
NATIONAL HEALING CORP. 1900 Corporate Blvd. NW #105W Boca Raton, FL 33431	NATIONAL HEALING CORP. 1900 Corporate Blvd. NW #105W Boca Raton, FL 33431
Zip / Country	Zip / Country

4. FEI Number 65-0678356 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301-2525	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

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.

SIGNATURE: Sylvia M. White 5/17/01
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐	**FILE NOW!!! FEE IS $150.00** **After MAY 1, 2001 Fee will be $550.00** **Make Check Payable to Department of State**	10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CD OTTO, EDGAR 1900 CORPORATE BLVD NW SUITE 400W BOCA RATON FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CEOD LINEHAN, STEPHEN D 1900 CORPORATE BLVD NW SUITE 400W BOCA RATON FL 33431	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SDVP PATRICK, JAMES E 1900 CORPORATE BLVD NW SUITE 400W BOCA RATON FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CEO & Board Secretary JAMES E PATRICK 1900 CORPORATE BLVD., #105W BOCA RATON, FL 33431	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D PANGIA, ROBERT 31 HYDE CIR WATCHUNG NJ 07060	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CFO James M. Tyler 1900 Corporate blvd. NW #105W Boca Raton, FL 33431	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D WALSH, ROBIN 9107 GASSERWAY COURT BRENTWOOD TN 37027	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D PIPER, JOSEPH 1114 31ST AVE SEATTLE WA 98112	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E034 (10/00)

13. I hereby certify that the information supplied with this filing does not qualify 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: James M. Tyler 5/15/01 (561) 994-1174
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #