

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 284630

FILED  
Apr 22, 2008  
Secretary of State

Entity Name: NATIONAL HEALTH AGENCY ASSOCIATES, INC.

## Current Principal Place of Business:

7985 113TH ST. N.  
SUITE 112  
SEMINOLE, FL 33772

## New Principal Place of Business:

## Current Mailing Address:

P. O. BOX 3600  
SEMINOLE, FL 337753600

## New Mailing Address:

FEI Number: 59-1091548

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MALONEY, JOHN L  
3862 CENTRAL AVE  
SAINT PETERSBURG, FL 33711 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: CPTS ( ) Delete  
Name: FRANKLIN, LARRY A  
Address: 9730 SAGO PT DR  
City-St-Zip: LARGO, FL 33777

Title: VDAS ( ) Delete  
Name: FRANKLIN, JANA L  
Address: 9730 SAGO PT DR  
City-St-Zip: LARGO, FL 33777

Title: VPD ( ) Delete  
Name: FRANKLIN, MATTHEW T  
Address: 660 KING ST, UNIT 203  
City-St-Zip: SAN FRANCISCO, CA 94107

Title: D ( ) Delete  
Name: FRANKLIN, LARRY A  
Address: 9730 SAGO PT DR  
City-St-Zip: LARGO, FL 33777

Title: D ( ) Delete  
Name: FRANKLIN, MARIA  
Address: 624 BLACK LION DR. NE  
City-St-Zip: ST. PETERSBURG, FL 33716

Title: D ( ) Delete  
Name: FRANKLIN, MICHELLE  
Address: 5530 SPANISH OAK LN, UNIT G  
City-St-Zip: OAK PARK, CA 91377

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VPD (X) Change ( ) Addition  
Name: FRANKLIN, MATTHEW T  
Address: 2210 JACKSON ST  
City-St-Zip: SAN FRANCISCO, CA 94115

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: JOHNSON, MICHELLE  
Address: 5530 SPANISH OAK LN, UNIT G  
City-St-Zip: OAK PARK, CA 91377

I hereby certify that the information supplied with this filing does not qualify 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: LARRY A. FRANKLIN

PRES

04/22/2008

Electronic Signature of Signing Officer or Director

Date