2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 12, 2006
Secretary of State

DOCUMENT# F02000006145

Entity Name: FORHEALTH TECHNOLOGIES, INC.

Current Principal Place of Business:

790 FENTRESS BLVD.
DAYTONA BEACH, FL 32114

New Principal Place of Business:

Current Mailing Address:

790 FENTRESS BLVD.
DAYTONA BEACH, FL 32114

New Mailing Address:

FEI Number: 52-2006184 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE
SUITE 4
WESTON, FL 33331 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:	C	( ) Delete
Name:	WOLFORD, ROD	
Address:	790 FENTRESS BLVD.	
City-St-Zip:	DAYTONA BEACH, FL 32114	
Title:	P	( ) Delete
Name:	OSBORNE, JOEL	
Address:	790 FENTRESS BLVD.	
City-St-Zip:	DAYTONA BEACH, FL 32114	
Title:	D	( ) Delete
Name:	DRANT, RYAN	
Address:	1119 ST. PAUL STREET	
City-St-Zip:	BALTIMORE, MD 21202	
Title:	D	( ) Delete
Name:	GROTTING, JOHN	
Address:	120 S. SIERRA AVE.	
City-St-Zip:	SOLANO BEACH, CA 92075	
Title:	D	( ) Delete
Name:	LOWELL, WAYNE	
Address:	6 BAYSIDE	
City-St-Zip:	IRVINE, CA 92614	
Title:	D	( ) Delete
Name:	PAIVA, WILLIAM	
Address:	100 W. 5TH STREET SUITE 805	
City-St-Zip:	TULSA, OK 74103	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

I hereby certify that the information supplied with this filing does not qualify for the 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: SPENCER D. LLOYD CFO 04/12/2006

Electronic Signature of Signing Officer or Director — Date