2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 28, 2006
Secretary of State

DOCUMENT# F03000001205

Entity Name: GLOBAL HEALTHCARE EXCHANGE, INC.

Current Principal Place of Business:

11000 WESTMOOR CIRCLE, STE. 400
WESTMINSTER, CO 80021

New Principal Place of Business:

Current Mailing Address:

11000 WESTMOOR CIRCLE, STE. 400
WESTMINSTER, CO 80021

New Mailing Address:

FEI Number: 84-1502378 **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: P ( ) Delete
Name: MAHONEY, MICHAEL
Address: 11000 WESTMOOR CIRCLE, STE. 400
City-St-Zip: WESTMINSTER, CO 80021

Title: CFO ( ) Delete
Name: NASH, GREG
Address: 11000 WESTMOOR CIRCLE, STE. 400
City-St-Zip: WESTMINSTER, CO 80021

Title: VP ( ) Delete
Name: JOHNSON, BRUCE
Address: 11000 WESTMOOR CIRCLE, STE. 400
City-St-Zip: WESTMINSTER, CO 80021

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO (X) Change ( ) Addition
Name: MAHONEY, MICHAEL
Address: 11000 WESTMOOR CIRCLE, STE. 400
City-St-Zip: WESTMINSTER, CO 80021

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

Title: COO (X) Change ( ) Addition
Name: JOHNSON, BRUCE
Address: 11000 WESTMOOR CIRCLE, STE. 400
City-St-Zip: WESTMINSTER, CO 80021

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: GREG NASH CFO 02/28/2006

Electronic Signature of Signing Officer or Director — Date