2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 15, 2002
Secretary of State

DOCUMENT# F99000004948

Entity Name: HEALTHCALC.NET, INC.

Current Principal Place of Business:

4409 QUAIL HOLLOW RD.
DALLAS, TX 75287

New Principal Place of Business:

16522 WESTGROVE DR
ADDISON, TX 75001 US

Current Mailing Address:

4409 QUAIL HOLLOW RD.
DALLAS, TX 75287

New Mailing Address:

16522 WESTGROVE DR
ADDISON, TX 75001 US

FEI Number: 75-2733620 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ELLIS, JOHN F
542 SABAL TRAIL CIRCLE
LONGWOOD, FL 32779 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

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: CPT ( ) Delete
Name: EGAN, PETER A PH.D
Address: 4409 QUAIL HOLLOW RD.
City-St-Zip: DALLAS, TX 75287

Title: VCVS ( ) Delete
Name: ELLIS, JOHN F
Address: 542 SABAL TRAIL CIRCLE
City-St-Zip: LONGWOOD, FL 32779

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CPT (X) Change ( ) Addition
Name: EGAN, PETER A PH.D
Address: 29 CATTAIL POND
City-St-Zip: FRISCO, TX 75034

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 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 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: JOHN F. ELLIS VCVS 08/15/2002

Electronic Signature of Signing Officer or Director Date