2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 09, 2005
Secretary of State

DOCUMENT# J60817

Entity Name: HEALTH CARE FROM THE HEART, INC.

Current Principal Place of Business:

% JAMES W. OSHER
925 BAYSHORE RD
NOKOMIS, FL 34275 US

New Principal Place of Business:

Current Mailing Address:

% JAMES W. OSHER
925 BAYSHORE RD
NOKOMIS, FL 34275 US

New Mailing Address:

FEI Number: 59-2781442 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

OSHER, JAMES W.
925 BAYSHORE RD
NOKOMIS, FL 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: D ( ) Delete
Name: OSHER, JAMES W.,
Address: 925 BAYSHORE RD
City-St-Zip: NOKOMIS, FL 34275

Title: VP ( ) Delete
Name: OSHER, JANICE L
Address: 925 BAYSHORE RD.
City-St-Zip: NOKOMIS, FL 34275

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: JAMES W. OSHER CEO 03/09/2005

Electronic Signature of Signing Officer or Director Date