2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000009040

FILED Apr 29, 2009 Secretary of State

Entity Name: THE HEALING CONNECTION INTERNATIONAL, INC.

Current Principal Place of Business: New Principal Place of Business:

5705 N. GENOA WAY UNIT 308 AURORA, CO 80019

Current Mailing Address: New Mailing Address:

P.O. BOX 390484 5705 N. GENOA WAY DENVER, CO 80239 UNIT 308 AURORA, CO 80019

FEI Number: 75-3092404 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ROSA, MIRIAM
12753 E ASBURY CIR
5705 N. GENOA WAY

AURORA, FL 80014 US UNIT 308
AURORA, COLORADO, FL 80019 US

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: REV. MIRIAM ROSA 04/29/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Fitle: D () Delete Title: PRES (X) Change () Addition

 Name:
 ROSA, MIRIAM
 Name:
 ROSA, MIRIAM

 Address:
 5705 N. GENOA WAY UNIT 308
 Address:
 5705 N. GENOA WAY UNIT 308

City-St-Zip: AURORA, CO 80019 City-St-Zip: AURORA, CO 80019

Title: Title: (X) Change () Addition () Delete GONZALEZ, DESIREE Name: GONZALEZ, DESIREE PASTOR Name: Address: 6609 N THATCHER AVE Address: 6609 N THATCHER AVE City-St-Zip: TAMPA, FL 33614 City-St-Zip: TAMPA, FL 33614

Title: D () Delete Title: D (X) Change () Addition Name: SMYZER, ROGER BISHOP

 Address:
 250 SIESTA LANE
 Address:
 250 SIESTA LANE

 City-St-Zip:
 LARGO, FL 33777
 City-St-Zip:
 LARGO, FL 33777

 Name:
 DASH, TARA L
 Name:
 DASH, TARA L MS.

 Address:
 195 SOUTH MONACO PARKWAY
 Address:
 1354 S. COOLIDGE CIRCLE

 City-St-Zip:
 DENVER, CO 80224
 City-St-Zip:
 AURORA, CO 80018

Title: () Delete Title: D () Change (X) Addition
Name: Name: BUCKNER, JANICE REV/DR

 Address:
 Address:
 2840 COOK STREET

 City-St-Zip:
 City-St-Zip:
 DENVER, CO 80205

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: REV. MIRIAM ROSA PRES 04/29/2009