

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000001902

FILED
Jan 08, 2007
Secretary of State

Entity Name: GOOD HEALTH CLINIC INC.

Current Principal Place of Business:

91555 OVERSEAS HWY
#1
TAVERNIER, FL 33070

New Principal Place of Business:

Current Mailing Address:

91555 OVERSEAS HWY
#1
TAVERNIER, FL 33070

New Mailing Address:

FEI Number: 04-3745805 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ZIEGLER, S. HARVEY ESQ
41 JOLLY ROGER DR
KEY LARGO, FL 33037 US

Name and Address of New Registered Agent:

YANKOW, SANFORD
91555 OVERSEAS HIGHWAY
1
TAVERNIER, FL 33070 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: SANFORD YANKOW

01/08/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: YANKOW, SANDY DR.
Address: 91555 OVERSEAS HIGHWAY, SUITE 1
City-St-Zip: TAVERNIER, FL 33070

Title: DT () Delete
Name: ANDERSON, ERIC A
Address: 125 RIVIERA DRIVE
City-St-Zip: TAVERNIER, FL 33070

Title: D () Delete
Name: ZIEGLER, S. HARVEY
Address: 41 JOLLY ROGER
City-St-Zip: KEY LARGO, FL 33037

Title: S () Delete
Name: CLARK, C.
Address: 127 S. ROLLING HILL
City-St-Zip: TAVERNIER, FL 33070

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CHR (X) Change () Addition
Name: YANKOW, SANFORD DR.
Address: 91555 OVERSEAS HIGHWAY, SUITE 1
City-St-Zip: TAVERNIER, FL 33070

Title: TRSR (X) Change () Addition
Name: TOLLEY, SHAWN
Address: 97665 OVERSEAS HIGHWAY
City-St-Zip: KEY LARGO, FL 33037

Title: VCHR (X) Change () Addition
Name: BATTREAL, CATHY
Address: 87899 OVERSEAS HIGHWAY
City-St-Zip: PLANTATION, FL 33070

Title: SECY (X) Change () Addition
Name: CLARK, CHRISTINE
Address: 127 SOUTH ROLLING HILL
City-St-Zip: TAVERNIER, FL 33070

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

SIGNATURE: SANFORD YANKOW

CHR

01/08/2007

Electronic Signature of Signing Officer or Director

Date