

2012 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED
Mar 15, 2012
Secretary of State**

DOCUMENT# N08000010359

Entity Name: HEALING HEROES NETWORK, INC.

Current Principal Place of Business:31608 US HWY 19
PALM HARBOR, FL 34684**New Principal Place of Business:**31640 US HIGHWAY 19 NORTH
SUITE 2
PALM HARBOR, FL 34684**Current Mailing Address:**310 W. 20TH STREET
SUITE 300
KANSAS CITY, MO 64108**New Mailing Address:**

FEI Number: 26-3714861

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:SPIEGEL, ALLAN M.D.
31608 US HWY 19
PALM HARBOR, FL 34684 US**Name and Address of New Registered Agent:**SPIEGEL, STACEY
31640 US HIGHWAY 19 NORTH
SUITE 2
PALM HARBOR, FL 34684 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: STACEY SPIEGEL

03/15/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:Title: E.D.
Name: SPIEGEL, STACEY
Address: 31640 US HIGHWAY 19 NORTH, SUITE 2
City-St-Zip: PALM HARBOR, FL 34684Title: SEC.
Name: MILHOAN, SANDRA
Address: 31640 US HIGHWAY 19 NORTH, SUITE 2
City-St-Zip: PALM HARBOR, FL 34684Title: DIR.
Name: STERNLIEB, HERB
Address: 31640 US HIGHWAY 19 NORTH, SUITE 2
City-St-Zip: PALM HARBOR, FL 34684Title: DIR.
Name: BALZANI, HENRY
Address: 31640 US HIGHWAY 19 NORTH, SUITE 2
City-St-Zip: PALM HARBOR, FL 34684

I hereby 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 all other like empowered.

SIGNATURE: ELLE STEADMAN

PARA

03/15/2012

Electronic Signature of Signing Officer or Director

Date