

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000000392

FILED
Jul 06, 2008
Secretary of State

Entity Name: UNIVERSAL HEALING CENTER, INC.

Current Principal Place of Business:

845 EXECUTIVE LANE
STE 100
ROCKLEDGE, FL 32955

New Principal Place of Business:

33 SUNTREE PLACE
STE C
MELBOURNE, FL 32940

Current Mailing Address:

P. O. BOX 411402
MELBOURNE, FL 32940

New Mailing Address:

FEI Number: 59-3420293 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

SIEBOLD, ROBIN
845 EXECUTIVE LANE
MELBOURNE, FL 32940 US

Name and Address of New Registered Agent:

SIEBOLD, ROBIN
33 SUNTREE PLACE
MELBOURNE, FL 32940 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: _____

Electronic Signature of Registered Agent

07/06/2008

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SIEBOLD, ROBIN
Address: 845 EXECUTIVE LANE, SUITE 100
City-St-Zip: ROCKLEDGE, FL 32955

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: SIEBOLD, ROBIN
Address: 33 SUNTREE PLACE
City-St-Zip: MELBOURNE, FL 32940

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: ROBIN SIEBOLD

D

07/06/2008

Electronic Signature of Signing Officer or Director

Date