## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT # N98000001409

1. Entity Name
NEW FRONTIER'S HEALTH FORCE, INC.

**FILED** Jan 17, 2008 8:00 am Secretary of State 01-17-2008 90023 046 \*\*\*\*70.00

			1								
1684 BELCHER RD. N 168		Mailing Address 1684 BELCHER RD. N CLEARWATER, FL. 3370	•		<b>40000</b> -						
2. Principal Place of Business - No P.O. Box # 3. I		3. Mailing Address	3. Mailing Address								
Suite, Apt. #, etc.		Suite, Apt. #, etc.			01142008	Chg-NP	CR2E0	37 (12/06)			
City & State		City & State			4. FEI Numbe 59-349			<b>├</b>	oplied For ot Applicable		
Zip	Country	Zip	Country	5. Certificate of Status Desired		- <b>X</b>	\$8.75 Add				
	6. Name and Address of Current	Registered Agent		·	7. Name and	Address of Nev	v Registered	Agent			
НА/А/ТНО	DAIE TONIVA		Name								
HAWTHORNE, TONYA 2237 CYPRESS POINT DR. E CLEARWATER, FL 33763			Street	Street Address (P.O. Box Number is Not Acceptable)							
	,										
			City				Fl	Zip Cod	e		
	e named entity submits this statement for tions of registered agent.	or the purpose of changing its	registered office	or registere	ed agent, or bol	h, in the State of	Florida, Lam	familiar with,	and accept		
SIGNATURE JOWY K HAW HUGGE (NOTE: Registered Apera signature required when renstating)  DATE											
	Signature: typed or primed harrie or registered agent	and the Happicable. (NOTE	. negistireti Agerit sigi	adure required v	wienre visianng)		DATE				
				ign Financing \$5.00 May Be tribution.   Added to Fees Florida Department of							
		9. Election Can Trust Fund C				e Fi					
10.	Due by May 1, 2008 OFFICERS AND DIE	Trust Fund C		Ll ,	Added to Fees	ANGES TO OFFIC	<b>CERS AND D</b>	rtment of S	tate		
TITLE	OFFICERS AND DIE	Trust Fund C	11.	CAT (	Added to Fees  DDITIONS/CH	FI ANGES TO OFFIC	<b>CERS AND D</b>	rtment of S	tate		
TITLE NAME	Due by May 1, 2008  OFFICERS AND DIE  BM- (* /*) SATTINGER, TIM	Trust Fund C	11. ππε NAMI:	CATO	Added to Fees  DDITIONS/CHA  IY GREET  BL 9 14 A	ANGES TO OFFICE  J. SECULO  J. SE	Orida Depa CERS AND D	rtment of S	tate		
TITLE	OFFICERS AND DIE	Trust Fund C	11.	CATO	Added to Fees  DDITIONS/CHA  IY GREET  BL 9 14 A	FI ANGES TO OFFIC	Orida Depa CERS AND D	rtment of S	tate		
TITLE NAME STREET ADDRESS	Due by May 1, 2008  OFFICERS AND DIE  BM- (* /*) SATTINGER, TIM  1913 CARDAMON DR.	Trust Fund C	T1. THE NAME STREET ADDRESS	CATE CST.	Added to Fees  DDITIONS/CH.  IY GREE  36 9th A  PETCASH	ANGES TO OFFICE  SOCI  VE N  VLG, FL	CERS AND D CERS AND D CERS AND D CERS AND D	rtment of S	tate		
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Due by May 1, 2008  OFFICERS AND DIE  BM- U / SATTINGER, TIM  1913 CARDAMON DR.  TRINITY, FL 34655  BM TABASUAEN  ALBERT, GEÖRGE	Trust Fund C	In E NAME:  THE NAME:  STREET ADDRESS CITY-ST-7IP  DRLC NAME:	CATE US:	Added to Fees  DDITIONS/CH.  IY GREET  BL 9th A  PETCASH  IN LINGS  4 GATES	ANGES TO OFFICE  J SECULAR  VEG, FL  OAHL  WAY COUN	CERS AND D CERS AND D CERS AND D CERS AND D	rtment of S IRECTORS IN Change	I 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Due by May 1, 2008  OFFICERS AND DIE  BM- U / SATTINGER, TIM  1913 CARDAMON DR.  TRINITY, FL 34655  BM TABASUACA  ALBERT, GEORGE  2175 BEECHER RD.	Trust Fund C	In E NAME STREET ADDRESS CITY-ST-ZIP DILE NAME STREET ADDRESS	CATE US:	Added to Fees  DDITIONS/CH.  IY GREET  BL 9th A  PETCASH  IN LINGS  4 GATES	ANGES TO OFFICE  J SECULAR  VEG, FL  OAHL  WAY COUN	CERS AND D CERS AND D CERS AND D CERS AND D	rtment of S IRECTORS IN Change	I 10		
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	Due by May 1, 2008  OFFICERS AND DIE  BM- UP SATTINGER, TIM 1913 CARDAMON DR. TRINITY, FL 34655  BM TABASULETA ALBERT, GEÖRGE 2175 BEECHER RD. CLEARWATER, FL 33763  BM M ELLIS, LINDA 3452 KEENE LAKE DR LARGO, FL 33771	Trust Fund C	T1.  THE NAME: STREET ADDRESS CITY-ST-ZIP  DILE NAME: STREET ADDRESS CITY-ST-ZIP  HEE NAME: STREET ADDRESS CITY-ST-ZIP	CATU (8: St. John TA. PA. P.00	Added to Fees  DDITIONS/CH.  14 GREET  36 9th A  PETCASH  4 GATER  MPA FL  TRICK C  . 60x P3	ANGES TO OFFICE  J SECULAR  WE N  WAG, FL  WAY COUN  336.1	CERS AND D CERS AND D CCTARY 33.7.0	TIMENT OF S  IRECTORS IN  Change  Change	I 10  Addition  Addition		
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12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SI	C 1	J A	т	ID	

1-14-08

Daytime Phone #