2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000012722

Entity Name: HEALTH DATA TECHNOLOGY, INC.

FILED Apr 27, 2006 Secretary of State

Current Principa	al Place of Business:	New Principal Place of Business:

202 S 22ND ST. 212

TAMPA, FL 33605

Current Mailing Address: New Mailing Address:

202 S 22ND ST. 212 TAMPA, FL 33605

FEI Number: 59-3624035 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:

PETER, MCINTIRE
2315 CLEWIS CT., #103
TAMPA, FL 33629 US
212
TAMPA, FL 33605 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: PETER MCINTIRE 04/27/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Name:
 MCINTIRE, PETER
 Name:
 MCINTIRE, PETER

 Address:
 2315 CLEWIS CT., #103
 Address:
 202 SOUTH 22ND ST., #212

 City-St-Zip:
 TAMPA, FL 33629
 City-St-Zip:
 TAMPA, FL 33605

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

 Name:
 KINNARD, DAVID
 Name:

 Address:
 9104 HIDDEN WATER CIRCLE
 Address:

 City-St-Zip:
 RIVERVIEW, FL 33569
 City-St-Zip:

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

SIGNATURE: PETER MCINTIRE P 04/27/2006