## 2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# P00000023814

Entity Name: ONLINE HEALTHNOW, INC.

**FILED** May 23, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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3027 MANATEE AVE WEST 4835 27TH ST WEST

740

BRADENTON, FL 34205 BRADENTON, FL 34207

**Current Mailing Address: New Mailing Address:** 

3027 MANATEE AVE WEST 4835 27TH ST WEST 740

BRADENTON, FL 34205 BRADENTON, FL 34207

FEI Number: 59-3631180 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

MORE, LAURA PRICE, JOE

13027 SAINT FILAGREE DR 4890 W. KENNEDY BLVD. RIVERVIEW, FL 33569 SUITE 740

TAMPA, FL 33609 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: JOE PRICE 05/23/2007

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

CHRISTIAN, JEANNE CHRISTIAN, JEANNE Name: Name: 3309 W. HAWTHORNE RD. 3309 W. HAWTHORNE RD. Address: Address:

City-St-Zip: TAMPA, FL 33611 City-St-Zip: TAMPA, FL 33611

VPTD Title: DCCO Title: () Delete (X) Change ( ) Addition DEANE, EDIE Name: Name: DEANE, EDIE

7411 17TH AVENUE NW 7411 17TH AVENUE NW Address: Address:

BRADENTON, FL 34209 BRADENTON, FL 34209 City-St-Zip: City-St-Zip:

Title: PD ( ) Delete Title: CGO (X) Change ( ) Addition

MORE, LAURA MORE, LAURA Name: Name:

13027 ST. FILAGREE DR. 13027 ST. FILAGREE DR. Address Address: City-St-Zip: RIVERVIEW, FL 33569 City-St-Zip: RIVERVIEW, FL 33569

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

WALLACE, TOM Name: Name: Address: Address: 4890 W. KENNEDY BLVD SUITE 740

City-St-Zip: City-St-Zip: TAMPA, FL 33609

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

PRICE, JOE Name: Name:

Address: 4890 W. KENNEDY BLVD. SUITE 740 Address:

City-St-Zip: City-St-Zip: TAMPA, FL 33609

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

SIGNATURE: EDIE DEANE COO 05/23/2007