

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000023814

Entity Name: ONLINE HEALTHNOW, INC.

FILED
Mar 14, 2008
Secretary of State

Current Principal Place of Business:

4835 27TH ST WEST
740
BRADENTON, FL 34207

New Principal Place of Business:

4754 STATE ROAD 64 EAST
BRADENTON, FL 34208

Current Mailing Address:

4835 27TH ST WEST
740
BRADENTON, FL 34207

New Mailing Address:

4754 STATE ROAD 64 EAST
BRADENTON, FL 34208

FEI Number: 59-3631180

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PRICE, JOE
4890 W. KENNEDY BLVD.
SUITE 740
TAMPA, FL 33609 US

Name and Address of New Registered Agent:

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

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CCO () Delete
Name: CHRISTIAN, JEANNE
Address: 3309 W. HAWTHORNE RD.
City-St-Zip: TAMPA, FL 33611

Title: DCCO () Delete
Name: DEANE, EDIE
Address: 7411 17TH AVENUE NW
City-St-Zip: BRADENTON, FL 34209

Title: CGO () Delete
Name: MORE, LAURA
Address: 13027 ST. FILAGREE DR.
City-St-Zip: RIVERVIEW, FL 33569

Title: D () Delete
Name: WALLACE, TOM
Address: 4890 W. KENNEDY BLVD SUITE 740
City-St-Zip: TAMPA, FL 33609

Title: D (X) Delete
Name: PRICE, JOE
Address: 4890 W. KENNEDY BLVD. SUITE 740
City-St-Zip: TAMPA, FL 33609

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEOD (X) Change () Addition
Name: WALLACE, TOM
Address: 4890 W. KENNEDY BLVD., SUITE 740
City-St-Zip: TAMPA, FL 33609

Title: CFOD (X) Change () Addition
Name: PRICE, JOE
Address: 4890 W. KENNEDY BLVD., SUITE 740
City-St-Zip: TAMPA, FL 33609

Title: VP (X) Change () Addition
Name: PERRY, ERIC
Address: 4754 STATE ROAD 64 EAST
City-St-Zip: BRADENTON, FL 34208

Title: VP (X) Change () Addition
Name: DEANE, EDIE
Address: 4754 STATE ROAD 64 EAST
City-St-Zip: BRADENTON, FL 34208

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JOE PRICE

CFO

03/14/2008

Electronic Signature of Signing Officer or Director

Date