

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P01000053628

Entity Name: HEALING ENERGY, INC.

**FILED**  
**Apr 02, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

321 NORTH LAKE BLVD  
102  
NORTH PALM BEACH, FL 34085410 US

**New Principal Place of Business:**

**Current Mailing Address:**

321 NORTH LAKE BLVD  
102  
NORTH PALM BEACH, FL 334085410 US

**New Mailing Address:**

FEI Number: 65-1128095      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

NAVERSEN, SUSAN  
8 TOURNAMENT BLVD  
PALM BEACH GARDENS, FL 334186842 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: VPST  
Name: MILLS, CHARLES C  
Address: 21 WEST ST., #18B  
City-St-Zip: NEW YORK, NY 10006

Title: PD  
Name: NAVERSEN, SUSAN G  
Address: 8 TOURNAMENT BLVD  
City-St-Zip: PALM BEACH GARDENS, FL 334186842

I hereby 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 all other like empowered.

SIGNATURE: SUSAN NAVERSEN

PD

04/02/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date