2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000093824

Entity Name: INTEGRATIVE HEALTH CONSULTING, INC.

FILED Apr 22, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

865 PALM BAY RD 865 PALM BAY RD

#103 #103

PALM BAY, FL 32904 WEST MELBOURNE, FL 32904

Current Mailing Address: New Mailing Address:

PO BOX 60236 PO BOX 61539

PALM BAY, FL 32906 PALM BAY, FL 32906-

FEI Number: 59-3748282 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:

PANTON, HAGEN
330 NARRAGANSETT ST NE
PALM BAY, FL 32907 US
PALM BAY, FL 32909 US
PALM BAY, FL 32909 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: HAGEN PANTON 04/22/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 PANTON, HAGEN
 Name:
 PANTON, HAGEN S

 Address:
 330 NARRAGANSETT ST NE
 Address:
 1942 THORNWOOD CIR

 City-St-Zip:
 PALM BAY, FL 32907
 City-St-Zip:
 PALM BAY, FL 32909

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: HAGEN PANTON PRES 04/22/2005