2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000026015

City-St-Zip: WEST PALM BEACH, FL 33411

Entity Name: OUR HEALTH CO-OP, INCORPORATED

FILED Jan 31, 2007 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
931 VILLAGE BLVD SUITE 905-480 WEST PALM BEACH, FL 33409				4188 WESTROADS DRIVE UNIT 123 RIVIERA BEACH, FL 33407		
Current Mailing Address:				New Mailing Address:		
931 VILLAGE BLVD SUITE 905-480 WEST PALM BEACH, FL 33409			Į	4188 WESTROADS DRIVE UNIT 123 RIVIERA BEACH, FL 33407		
FEI Number:	: 90-0026358	FEI Number Applied For ()	FEI Numb	per Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
119 AUGÚ JUPITER, The above	FL 334588155		purpose of	changing its registere	d office or registered agent, or both,	
SIGNATUI	RE:					
Electronic Signature of Registered Agent					Date	
Election Car	mpaign Financing	Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:			,	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	D () MARTNEY, CIN 1983 KIDD CIR PARK CITY, UT	CLE	1 A	Fitle: Name: Address: Dity-St-Zip:	() Change () Addition	
Title: Name: Address:	D () FASON, STEPH 765 WHIPPOOI		1	Title: Name: Nddress:	() Change () Addition	

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: STEPHEN FASON D 01/31/2007