

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000040760

FILED
Mar 21, 2007
Secretary of State

Entity Name: HEALTH SOURCE PLUS INC.

Current Principal Place of Business:

10 RIDGE BLVD
OCEAN RIDGE, FL 334356225

New Principal Place of Business:

Current Mailing Address:

10 RIDGE BLVD
OCEAN RIDGE, FL 334356225

New Mailing Address:

FEI Number: 20-0040067

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BELLO, GARY
10 RIDGE BLVD
OCEAN RIDGE, FL 334356225 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: PCEO () Delete
Name: BELLO, GARY
Address: 10 RIDGE BLVD
City-St-Zip: OCEAN RIDGE, FL 334356225

Title: D () Delete
Name: BELLO, GARY
Address: 10 RIDGE BLVD
City-St-Zip: OCEAN RIDGE, FL 334356225

Title: STD () Delete
Name: BELLO, DONNA
Address: 10 RIDGE BLVD
City-St-Zip: OCEAN RIDGE, FL 334356225

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: () Change () Addition
Name:
Address:
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: DONNA BELLO

STD

03/21/2007

Electronic Signature of Signing Officer or Director

Date