2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2006
Secretary of State

DOCUMENT# P04000025271

Entity Name: THE AGENCY FOR HEALTH & LIFE, INC.

Current Principal Place of Business:

2046 SW MAPP RD STE 204
PALM CITY, FL 34990

New Principal Place of Business:

2740 SW MARTIN DOWNS BLVD
236
PALM CITY, FL 34990

Current Mailing Address:

2046 SW MAPP RD STE 204
PALM CITY, FL 34990

New Mailing Address:

2740 SW MARTIN DOWNS BLVD
#236
PALM CITY, FL 34990

FEI Number: 20-0713335 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HASELL, GLENN
2046 SW MAPP RD STE 204
PALM CITY, FL 34990 US

Name and Address of New Registered Agent:

HASELL, GLENN
2740 SW MARTIN DOWNS BLVD
236
PALM CITY, FL 34990 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: _____ 04/28/2006
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: HASELL, GLENN
Address: 2046 SW MAPP RD STE 204
City-St-Zip: PALM CITY, FL 34990

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition
Name: HASELL, GLENN
Address: 2046 SW MAPP RD STE 204
City-St-Zip: PALM CITY, FL 34990

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: GLENN HASELL PRES 04/28/2006
Electronic Signature of Signing Officer or Director — Date