2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2011
Secretary of State

DOCUMENT# P04000083361

Entity Name: HEALING HANDS OF SARASOTA, INC.

Current Principal Place of Business:

5050 BROOKMEADE DR.
SARASOTA, FL 34232

New Principal Place of Business:

1659 NAPOLI DR.W
SARASOTA, FL 34232

Current Mailing Address:

5050 BROOKMEADE DR.
SARASOTA, FL 34232

New Mailing Address:

1659 NAPOLI DR. W
SARASOTA, FL 34232

FEI Number: 20-1186173 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PALMER, BRIAN
2937 BEE RIDGE RD.
SUITE 2
SARASOTA, FL 34239 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

OFFICERS AND DIRECTORS:

Title: P
Name: POLLAK, ANN C
Address: 1659 NAPOLI DR.W
City-St-Zip: SARASOTA, FL 34232

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: ANN C. POLLAK P 04/28/2011

Electronic Signature of Signing Officer or Director — Date