## 2011 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000136845

Entity Name: HEALING ALTERNATIVES, INC.

FILED Mar 05, 2011 Secretary of State

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

683 DOUGLAS AVENUE 125 WEST PINEVIEW ST.

#101 1009

ALTAMONTE SPRINGS, FL 32714 US ALTAMONTE SPRINGS, FL 32714 US

Current Mailing Address: New Mailing Address:

100 WEST YORK CT. 125 WEST PINEVIEW ST.

LONGWOOD, FL 32779 1009

ALTAMONTE SPRINGS, FL 32714 US

FEI Number: 65-1234647 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:

JOHNSTON, DONNA M
100 WEST YORK CT.
125 WEST PINEVIEW ST.

LONGWOOD, FL 32779 US 1009
ALTAMONTE SPRINGS, FL 32714 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: DONNA M JOHNSTON 03/05/2011

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title: MS

Name: JOHNSTON, DONNA M Address: 100 WEST YORK CT. City-St-Zip: LONGWOOD, FL 32779

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: DONNA M JOHNSTON PRES 03/05/2011