2007 FOR PROFIT CORPORATION

FILED ANNUAL REPORT Jan 12, 2007 08:00 AM DOCUMENT # P05000001798 **Secretary of State** 1. Entity Name S. HEATH, CRNA, INC Principal Place of Business Mailing Address 18002 SPENCER ROAD 18002 SPENCER ROAD ODESSA, FL 33556 TUS ODESSA, FL 33556 US 01042007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 20-2105059 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent HEATH, SUE DO NOT WRITE 18002 SPENCER ROAD ODESSA, FL 33556 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered egent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2007 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS me NAME HEATH, SUE STREET ADDRESS 18002 SPENCER ROAD CITY-ST-ZIP ODESSA, FL 33556 U00000584461 01/12/07-80038-004 150.00 TITLE NAME STREET ADDRESS CITY-ST-ZIP HILE MARKE STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

TITLE

STREET ADDRESS DITY-ST-ZIP