2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000049154

Entity Name: NEW HEALTH CORP.

FILED May 06, 2008 Secretary of State

Current Principal Place of Business: New Principal Plac	e of Business:
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245 EAST DRIVE 1413 S. PATRICK DR.

105 105 1410 0.17(H)(6)(B)(

MELBOURNE, FL 32904 INDN HRBR BCH, FL 32937

Current Mailing Address: New Mailing Address:

245 EAST DRIVE 1413 S. PATRICK DR.

MELBOURNE, FL 32904 INDN HRBR BCH, FL 32937

FEI Number: 71-0981097 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:

STANTON, GARY O 834 LOGGERHEAD ISLAND DRIVE SATELLITE BEACH, FL 32937 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:

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES () Delete Title: PRES (X) Change () Addition

 Name:
 STANTON, GARY O
 Name:
 STANTON, GARY O

 Address:
 245 EAST DRIVE, STE 105
 Address:
 1413 S. PATRICK DR., STE 3

 City-St-Zip:
 MELBOURNE, FL 32904
 City-St-Zip:
 INDN HRBR BCH, FL 32937

I hereby certify that the information supplied with this filing does not qualify 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: GARY STANTON PRES 05/06/2008