

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000000824

FILED
Apr 30, 2009
Secretary of State

Entity Name: HEALING HANDS HEALTHCARE SERVICES INC.

Current Principal Place of Business:

101 SILVER DOLLAR DRIVE
HAWTHORNE, FL 32640

New Principal Place of Business:

1507 TANAGER DRIVE
ORLANDO, FL 32803

Current Mailing Address:

101 SILVER DOLLAR DRIVE
HAWTHORNE, FL 32640

New Mailing Address:

1507 TANAGER DRIVE
ORLANDO, FL 32803

FEI Number: 26-1378003

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JONES, THOMAS M
101 SILVER DOLLAR DRIVE
HAWTHORNE, FL 32640 US

Name and Address of New Registered Agent:

JONES, THOMAS M
1507 TANAGER DR.
ORLANDO, FL 32803 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:

04/30/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: JONES, THOMAS M
Address: 101 SILVER DOLLAR DRIVE
City-St-Zip: HAWTHORNE, FL 32640

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: JONES, THOMAS M
Address: 1507 TANAGER DRIVE
City-St-Zip: ORLANDO, FL 32803

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: THOMAS M. JONES

DP

04/30/2009

Electronic Signature of Signing Officer or Director

Date