2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 29, 2011
Secretary of State

DOCUMENT# P10000046911

Entity Name: THE CENTER FOR NATURAL HEALING INC

Current Principal Place of Business:

4632 VINCENNES BLVD
SUITE 104
CAPE CORAL, FL 33904

New Principal Place of Business:

4632 VINCENNES BLVD
SUITE 104
CAPE CORAL, FL 33904 US

Current Mailing Address:

4632 VINCENNES BLVD
SUITE 104
CAPE CORAL, FL 33904

New Mailing Address:

4632 VINCENNES BLVD
SUITE 104
CAPE CORAL, FL 33904 US

FEI Number: 01-0969319 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TRANTER, CANDACE A
4632 VINCENNES BLVD
SUITE 104
CAPE CORAL, FL 33904 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: TRANTER, CANDACE A
Address: 4632 VINCENNES BLVD #104
City-St-Zip: CAPE CORAL, FL 33904 US

Title: VP
Name: O'RAFFERTY, NONEEN J
Address: 4632 VINCENNES BLVD #104
City-St-Zip: CAPE CORAL, FL 33904 US

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: CANDACE TRANTER P 03/29/2011

Electronic Signature of Signing Officer or Director Date