

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000026309

Entity Name: HEALTH WORKS WEST, INC.

FILED
Apr 21, 2007
Secretary of State

Current Principal Place of Business:

501 VILLAGE GREEN PKWY
STE 18
BRADENTON, FL 34209

New Principal Place of Business:

Current Mailing Address:

501 VILLAGE GREEN PKWY
STE 18
BRADENTON, FL 34209

New Mailing Address:

FEI Number: 65-0402526

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEE, CATHY
501 VILLAGE GREEN PKWY
STE 18
BRADENTON, FL 34209 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: LEE, CATHY
Address: 501 VILLAGE GREEN PKEY STE 18
City-St-Zip: BRADENTON, FL 34209

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: LEE, CATHY A PRES
Address: 501 VILLAGE GREEN PKEY STE 18
City-St-Zip: BRADENTON, FL 34209

I hereby certify that the information supplied with this filing does not qualify for the 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: CATHY LEE

PRES

04/21/2007

Electronic Signature of Signing Officer or Director

Date