

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000030687

Entity Name: HEALTHFILE, INC.

Current Principal Place of Business:

602 HARRISON AVE.
SUITE 3
PANAMA CITY, FL 32401

Current Mailing Address:

602 HARRISON AVE.
SUITE 3
PANAMA CITY, FL 32401

FEI Number: 59-3242907

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

SCOTT, M N
602 HARRISON AVE.
SUITE 3
PANAMA CITY, FL 32401 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

Officer/Director Detail :

Title PD
Name SCOTT, M N
Address 602 HARRISON AVE
City-State-Zip: PANAMA CITY FL 32401

Title VD
Name SCOTT, LEE M
Address 602 HARRISON AVE
City-State-Zip: PANAMA CITY FL 32401

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: M NELSON SCOTT

PRESIDENT

04/29/2013

Electronic Signature of Signing Officer/Director Detail

Date