

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000000993

FILED  
May 01, 2006  
Secretary of State

Entity Name: HEALTH CONSERVATION, INC.

**Current Principal Place of Business:**

810 EAST STATE STREET  
STE 206  
ROCKFORD, IL 61104

**New Principal Place of Business:**

**Current Mailing Address:**

810 EAST STATE STREET  
STE 206  
ROCKFORD, IL 61104

**New Mailing Address:**

FEI Number: 37-1367062      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

DROLLINGER, CYNTHIA  
5680 WILLIAMS DRIVE  
FORT MYERS BEACH, FL 33931      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

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:**

Title: P ( ) Delete  
Name: DROLLINGER, CYNTHIA  
Address: 810 EAST STATE ST., STE 206  
City-St-Zip: ROCKFORD, IL

Title: V ( ) Delete  
Name: JENSEMA, JERRY  
Address: 810 EAST STATE ST., STE 206  
City-St-Zip: ROCKFORD, IL 61104

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: CYNTHIA DROLLINGER

P

05/01/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date