

SECURITIES AND EXCHANGE COMMISSION

FORM 3

Filing Date: **2008-08-29** | Period of Report: **2008-07-24**
SEC Accession No. **0001432453-08-000020**

([HTML Version](#) on [secdatabase.com](#))

REPORTING OWNER

MACFARLAND HENRY J

CIK: **1444191**

Type: **3** | Act: **34** | File No.: **333-127016** | Film No.: **081048173**

Mailing Address
2980 SICILY WAY
LEWISVILLE TX 75067

Business Address
972-315-3024

ISSUER

CHINA HEALTH CARE CORP

CIK: **1333878** | IRS No.: **000000000** | State of Incorp.: **WY** | Fiscal Year End: **0531**
SIC: **1040** Gold and silver ores

Mailing Address
ROOM 904, TUNG WAI
COMMERCIAL BUILDING
109 ? 111 GLOUCESTER
ROAD
WAN CHAI K3 82001

Business Address
ROOM 904, TUNG WAI
COMMERCIAL BUILDING
109 ? 111 GLOUCESTER
ROAD
WAN CHAI K3 82001
852. 2511.8008

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL	
OMB Number:	3235-0104
Expires:	02/28/2011
Estimated average burden hours per response	0.5

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person <u>MACFARLAND HENRY J</u> (Last) (First) (Middle) <u>2980 SICILY WAY</u> (Street) <u>LEWISVILLE, TX 75067</u> (City) (State) (Zip)	2. Date of Event Requiring Statement (Month/Day/Year) <u>07/24/2008</u>	3. Issuer Name and Ticker or Trading Symbol <u>CHINA HEALTH CARE CORP [CNHL]</u>		
		4. Relationship of Reporting Person(s) to Issuer (Check all applicable) ___ Director ___ 10% Owner <u>X</u> Officer (give title below) ___ Other (specify below) <u>CEO</u>		5. If Amendment, Date Original Filed (Month/Day/Year)
		6. Individual or Joint/Group Filing (Check applicable line) <u>X</u> Form Filed by One Reporting Person ___ Form Filed by More than One Reporting Person		

Table I - Non-Derivative Securities Beneficially Owned

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
---------------------------------	---	--	---

Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		4. Conversion or Exercise Price of Derivative Security	5. Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 5)	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of Shares			

Signatures

/s/ Henry J. Macfarland
 ** Signature of Reporting Person

08/29/2008
 Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

* If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.