Durschlag N Form 5													
April 29, 20									OMB AF	PROVAL			
FORM	-	SECURITIES AND EXCHANGE COMMISSIO				MMISSION	OMB Number: 3235-036						
Check this box if no longer subject			Washington, D.C. 20549						Expires:	January 31, 2005			
to Section 16. Form 4 or Form 5 obligations may continue.			STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES						Estimated average burden hours per response 1.0				
See Instru 1(b). Form 3 H Reported Form 4 Transacti Reported	Filed pu Ioldings Section 17	(a) of the l	Public U	6(a) of the S tility Holdin vestment Co	ig Compan	y Ac	t of 19		1				
1. Name and Address of Reporting Person <u>*</u> Durschlag M E			2. Issuer Name and Ticker or Trading Symbol Healthsport, Inc. [HSPO]					5. Relationship of Reporting Person(s) to Issuer					
(Last)	(Last) (First) (Middle)			3. Statement for Issuer's Fiscal Year Ended				(Check all applicable)					
C/O HEAL BEACON	(Month/Day/Year) 12/31/2009					X Director 10% Owner X Officer (give title Other (specify below) below) Chief Executive Officer							
	4. If Amendment, Date Original Filed(Month/Day/Year)				6.	6. Individual or Joint/Group Reporting							
	,	•					applicable line)						
OXNARD,	, CA 93033							C_Form Filed by C _ Form Filed by M rson					
(City)	(State)	(Zip)					-	ed, Disposed of		•			
1.Title of Security (Instr. 3)	2. Transaction Dat (Month/Day/Year)		n Date, if	3. Transaction Code (Instr. 8)	4. Securitie (A) or Disp (Instr. 3, 4 a	osed c and 5) (A)	of (D)	5. Amount of Securities Beneficially Owned at end of Issuer's Fiscal Year (Instr. 3 and	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
Common Stock	12/01/2009	Â		A4	Amount 300,000	or (D) A	Price \$ 0 (1)	4) 875,000	D	Â			

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

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contained in this form are not required to respond unless
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(9-02)

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transaction Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	int of rlying	8. Price of Derivative Security (Instr. 5)	9. O B O E I S F I (I
				(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director 10% Owner Officer		Officer	Other				
Durschlag M E C/O HEALTHSPORT INC. 1620 BEACON PLACE OXNARD,, CA 93033	ÂX	Â	Chief Executive Officer	Â				
Signatures								
/s/ Thomas Beckett as Attorney Durschlag	for M.E.	04/29/2010						
<u>**</u> Signature of Report	Date							

Explanation of Responses:

- * 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).

The 300,000 unregistered shares were issued to Mr. Durschlag in connection with Mr. Durschlag's resignation as chief executive officer(1) and a director of HealthSport, Inc. on December 1, 2009 and in exchange for Mr. Durschlag entering into a general release with HealthSport, Inc.

Note: File three copies of this Form, one of which must be manually signed. If space provided is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.