

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000008810

FILED
Mar 30, 2010
Secretary of State

Entity Name: PHILIPPINE NURSES ASSOCIATION OF NORTHEAST FLORIDA, INC.

Current Principal Place of Business:

12176 IRWIN MANOR DRIVE
JACKSONVILLE, FL 32246

New Principal Place of Business:

Current Mailing Address:

12176 IRWIN MANOR DRIVE
JACKSONVILLE, FL 32246

New Mailing Address:

FEI Number: 20-1392762 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

DEVERA, ROMEO D
12176 IRWIN MANOR DRIVE
JACKSONVILLE, FL 32246 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

OFFICERS AND DIRECTORS:

Title: PRES
Name: DEVERA, ROMEO
Address: 12176 IRWIN MANOR DRIVE
City-St-Zip: JACKSONVILLE, FL 32246

Title: PE
Name: RIO, GERMINA
Address: 2343 HUCKINS COURT
City-St-Zip: JACKSONVILLE, FL 32225

Title: VP
Name: VIRAY, DAPHNE
Address: 4434 ARCH CREEK DRIVE
City-St-Zip: JACKSONVILLE, FL 32257

Title: S
Name: MATITO, CELESTE
Address: 7808 FAWN VALLEY LANE
City-St-Zip: JACKSONVILLE, FL 32256

Title: S
Name: TYSON, MARILINA
Address: 1352 RED MAPLE COURT
City-St-Zip: JACKSONVILLE, FL 32073

Title: T
Name: MERZA, EDNA
Address: 4924 RED ISLAND TRAIL
City-St-Zip: JACKSONVILLE, FL 32225

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ROMEO DEVERA

PRES

03/30/2010

Electronic Signature of Signing Officer or Director

Date