

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 09, 2002 8:00 am
Secretary of State

04-18-2002 90350 030 ***150.00

DOCUMENT # P01000094605

1. Entity Name
RNPARTNERS, INC.

*Nic
 PLO
 11/16/01
 NAM*

Principal Place of Business
**905 CLINT MOORE ROAD
 BOCA RATON FL 33487**

Mailing Address
**905 CLINT MOORE ROAD
 BOCA RATON FL 33487**

(C)

38186



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-1142993

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**GATSOS, ELAINE M ESQ.
 1499 WEST PALMETTO PARK ROAD
 SUITE 210
 BOCA RATON FL 33486**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$550.00
After September 13, 2002 Fee will be \$750.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPS HAMMOND, ROBERT A 621 N.W. 53RD STREET #700 BOCA RATON FL 33487	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPS HAMMOND, ROBERT A 905 CLINT MOORE ROAD BOCA RATON, FL 33487	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CFO WEICHER, MARK 905 CLINT MOORE ROAD BOCA RATON, FL 33487	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
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13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Mark Weicher **REQUIRED CFO**

Date

7/6/02

Daytime Phone #

561-953-0700

CR2E034 (4/02)

2002 UNIFORM BUSINESS REPORT (UBR)

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RNPARTNERS, INC.

Attachment
38184

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Mailing Address
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BOCA RATON FL 33487



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Zip Country

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SIGNATURE: *[Signature]* **REQUIRE CFO** 7/26/02 561-953-0700

COUNT NUMBER

RNpartners

Partnering with the Finest in Critical Care

Attachment
Document#
PO1000094605

July 2, 2002

38/86

Division of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, Florida 32302-1500

RE: Document No.: PO1000094605
Entity Name: RNpartners, Inc.
2002 Uniform Business Report ("UBR")

Dear Sir:

We recently received a 2002 UBR for the above entity in the mail. We were somewhat puzzled by the receipt of the UBR as we had filed a UBR for the above entity in April 2002 and had paid our fee of \$150.00 via check number 10206 dated April 9, 2002 (copy of both original UBR and check enclosed). We contacted Drew of the Florida Division of Corporations who advised us that there was some form of discrepancy with regard to our original filing, a notice of which was sent to us but never received by us. Accordingly, we enclose the new 2002 UBR for the above entity and trust that such filing will resolve the initial discrepancy. We were also advised by Drew that a second payment would not be necessary.

Thank you for your prompt attention and cooperation to this matter.

Very truly yours,



Mark Weicher
Controller
RNpartners, Inc.

Boca Raton > Corporate Headquarters

905 A Clint Moore Rd.

Boca Raton, FL 33487

P 561.953.0742 F 561.953.0798

State of Florida

Attachment
Document #
P01000094605

38186

Department of State

I certify the attached is a true and correct copy of the Articles of Amendment, filed on November 16, 2001, to Articles of Incorporation for OLYMPUS STAFFING, INC. which changed its name to RNPARTNERS, INC., a Florida corporation, as shown by the records of this office.

The document number of this corporation is P01000094605.

Given under my hand and the
Great Seal of the State of Florida
at Tallahassee, the Capitol, this the
Twenty-sixth day of November, 2001



CR2EO22 (1-99)

Katherine Harris

Katherine Harris
Secretary of State

Attachment
Document #
PO1000094605

38186

LMM331-1 01024243770001 McBEE, 1 800 662-2331 011128082195

RNpartners

Partnering with the Finest in Critical Care

OPERATING ACCOUNT
621 N.W. 59th STREET, SUITE 720
BOCA RATON, FL 33487

NORTHERN TRUST BANK OF FLORIDA N.A.
FL 32818

80071020

10206

Memo: FEIN # 65-1142993

One Hundred Fifty and 00/100 Dollars

CHECK NO. 10206
DATE Apr 9, 2002

AMOUNT *****\$150.00

PAY TO THE ORDER OF
Division of Corporations
Department of State
P.O. BOX 1500
Tallahassee, FL 32302-1500

030374426 2091 2477 00 04-25-02

040151697 1702 1505 06 04-25-02



⑆010206⑆ ⑆066009650⑆ ⑆010057455⑆

⑆0000015000⑆

SECURITY FEATURES: MICRO PRINT TOP & BOTTOM BORDERS COLORED PATTERN - ARTIFICIAL WATERMARK ON REVERSE SIDE - MISSING FEATURE INDICATES A COPY