2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000008810

FILED Jan 22, 2009 Secretary of State

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

Current Principal Place of Business: New Principal Place of Business:

598 CHIVAS CT. 12176 IRWIN MANOR DRIVE ORANGE PARK, FL 32073 JACKSONVILLE, FL 32246

Current Mailing Address: New Mailing Address:

598 CHIVAS CT. 12176 IRWIN MANOR DRIVE ORANGE PARK, FL 32073 12176 IRWIN MANOR DRIVE JACKSONVILLE, FL 32246

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

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

LOCQUIAO, JULIE F
598 CHIVAS CT.
ORANGE PARK, FL 32073 US
DEVERA, ROMEO D
12176 IRWIN MANOR DRIVE
JACKSONVILLE, FL 32246 US

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

in the State of Florida.

SIGNATURE: ROMEO DEVERA 01/22/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 PRES
 () Delete
 Title:
 PRES
 (X) Change () Addition

 Name:
 LOCQUIAO, JULIE
 Name:
 DEVERA, ROMEO

Address: 598 CHIVAS CT. Address: 12176 IRWIN MANOR DRIVE
City-St-Zip: ORANGE PARK, FL 32073 City-St-Zip: JACKSONVILLE, FL 32246

Title: PE () Delete Title: PE (X) Change () Addition Name: VERA, ROMEO DE Name: RIO, GERMINA

Address: 12176 IRWIN MANOR DRIVE Address: 2343 HUCKINS COURT
City-St-Zip: JACKSONVILLE, FL 32246 City-St-Zip: JACKSONVILLE, FL 32225

Title: VP () Delete Title: VP (X) Change () Addition Name: CALLAO, VELIA Name: VIRAY, DAPHNE

Address: 8321 PEPPERWOOD DR. Address: 4434 ARCH CREEK DRIVE
City-St-Zip: JACKSONVILLE, FL 32244 City-St-Zip: JACKSONVILLE, FL 32257

ity-si-zip: JACKSONVILLE, FL 32244 City-si-zip: JACKSONVILLE, FL 32257

Title: S () Delete Title: S (X) Change () Addition Name: BAYSA, ROWENA Name: MATITO, CELESTE

 Address:
 12283 CARDINA CREEK
 Address:
 7808 FAWN VALLEY LANE

 City-St-Zip:
 JACKSONVILLE, FL 32218
 City-St-Zip:
 JACKSONVILLE, FL 32256

Title: S () Delete Title: S (X) Change () Addition

 Name:
 VIRAY, DAPHNE
 Name:
 TYSON, MARILINA

 Address:
 4434 ARCH CREEK DR.
 Address:
 1352 RED MAPLE COURT

 City-St-Zip:
 JACKSONVILLE, FL 32257
 City-St-Zip:
 JACKSONVILLE, FL 32073

Title: T () Delete Title: T (X) Change () Addition

 Name:
 RAPADAS, PAULINE
 Name:
 MERZA, EDNA

 Address:
 5414 NANNETTE CT.
 Address:
 4924 RED ISLAND TRAIL

 City-St-Zip:
 JACKSONVILLE, FL 32244
 City-St-Zip:
 JACKSONVILLE, FL 32225

I hereby certify that the information supplied with this filing does not qualify 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROMEO DEVERA PRES 01/22/2009