

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 702559

Entity Name: ROYCE NURSING FOUNDATION, INC.

Current Principal Place of Business:

1500 NW 12TH AVE
709D
MIAMI, FL 33136

Current Mailing Address:

1500 NW 12 AVE
709D
MIAMI, FL 33014

FEI Number: 51-0169662

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ROBERTS, NANCY E
15060 EGAN LANE
MIAMI LAKES, FL 33014 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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Officer/Director Detail :

Title STD
Name ROBERTS, NANCY
Address 15060 EGAN LANE
City-State-Zip: MIAMI LAKES FL 33014

Title PD
Name RUSSELL, BARBARA
Address 2626 SW 183RD AVENUE
City-State-Zip: MIRAMAR FL 33029

Title VPD
Name KICKLIGHTER, LEILANI
Address 5102 LAUREL CIRCLE
City-State-Zip: TAMARAC FL 33319

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: NANCY ROBERTS

SECRETARY/TREASURER 01/07/2014

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date