

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 751959

Entity Name: FLORIDA SOCIETY OF PERIANESTHESIA NURSES,
INCORPORATED

Current Principal Place of Business:

8344 WILSON BLVD.
JACKSONVILLE, FL 32210

Current Mailing Address:

8344 WILSON BLVD.
JACKSONVILLE, FL 32210 US

FEI Number: 59-1759997

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

FISHMAN, NANCY C
8344 WILSON BLVD.
JACKSONVILLE, FL 32210 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 PRESIDENT
Name PASSIG, TERRI
Address 1621 CRESTWOOD DR
City-State-Zip: ORLANDO FL 32804

Title S
Name JEFFERS, CHERYL
Address 27 FILMORE STREET
City-State-Zip: ORLANDO FL 32607

Title TREA
Name FISHMAN, NANCY
Address 8344 WILSON BLVD.
City-State-Zip: JACKSONVILLE FL 32210

Title IMMEDIATE PAST PRESIDENT
Name GODFREY, KIMBERLY
Address 1330 HAWK CREST DR
City-State-Zip: MIDDLEBURG FL 32068

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 G FISHMAN

TREASURER

02/23/2013

Electronic Signature of Signing Officer/Director Detail

Date