2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000008810

Entity Name: PHILIPPINE NURSES ASSOCIATION OF NORTHEAST FLORIDA,

INC.

FILED Feb 15, 2016 Secretary of State CC5566019210

Current Principal Place of Business:

4434 ARCH CREEK DRIVE JACKSONVILLE, FL 32257

Current Mailing Address:

4434 ARCH CREEK DRIVE JACKSONVILLE, FL 32257 US

FEI Number: 20-1392762 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

VIRAY, DAPHNE A. 4434 ARCH CREEK DRIVE JACKSONVILLE, FL 32257 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: DAPHNE A. VIRAY 02/15/2016

Electronic Signature of Registered Agent Date

Officer/Director Detail:

TitlePRESIDENTTitlePRESIDENT-ELECTNameVIRAY, DAPHNE A.NameCUEVAS, LILIBETH T.

Address 4434 ARCH CREEK DRIVE Address 9380 TRAMORE GLEN COURT
City-State-Zip: JACKSONVILLE FL 32257 City-State-Zip: JACKSONVILLE FL 32256

Title VP Title TREASURER

Name VILLANUEVA, EDNA Name TORRES, ISABELITA

Address 8654 CANOPY OAKS DRIVE Address 11119 CHESTER LAKE DRIVE E

City-State-Zip: JACKSONVILLE FL 32256

City-State-Zip: JACKSONVILLE FL 32256

Title ASST, TREASURER Title ADVISOR

Name PALOMPO, DOLORES Name DE VERA, ROMEO

Address 5539 COASTAL LANE N Address 12176 IRWIN MANOR DR.

City-State-Zip: JACKSONVILLE FL 32258 City-State-Zip: JACKSONVILLE FL 32246

Title ADVISOR Title SECRETARY
Name CALLAO, VELIA Name RYAN, NAVARRO

Address 8321 PEPPERWOOD DRIVE Address 8643 HUNTERS CREEK DRIVE S
City-State-Zip: JACKSONVILLE FL 32244 City-State-Zip: JACKSONVILLE FL 32256

Continues on page 2

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: DAPHNE VIRAY PRESIDENT 02/15/2016

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title AUDITOR Title ADVISOR

Name JOCSON, TERESITA Name RIO, GERMINA

Address 4356 BERGHLEY CT S. Address 2343 HUCKINS CT

City-State-Zip: JACKSONVILLE FL 32257 City-State-Zip: JACKSONVILLE FL 32225