

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000008810

FILED
Jun 11, 2020
Secretary of State
8445674672CC

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

Current Principal Place of Business:

2343 HUCKINS CT
JACKSONVILLE, FL 32225

Current Mailing Address:

2343 HUCKINS CT
JACKSONVILLE, FL 32225 US

FEI Number: 20-1392762

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RIO, GERMINA EMILY
2343 HUCKINS CT
JACKSONVILLE, FL 32225 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: GERMINA EMILY RIO

06/11/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P
Name RIO, GERMINA EMILY
Address 2343 HUCKINS CT
City-State-Zip: JACKSONVILLE FL 32225

Title V
Name CUARESMA, ANTONINA
Address 245 COCKATIEL DRIVE
City-State-Zip: JACKSONVILLE FL 32225

Title V
Name HILL, ROSABEL
Address 1693 TIMBER CROSSING LANE
City-State-Zip: JACKSONVILLE FL 32225

Title S
Name VILLANUEVA, EDNA
Address 8654 CANOPY OAKS DRIVE
City-State-Zip: JACKSONVILLE FL 32256

Title T
Name MERZA, EDNA
Address 4924 REED ISLAND TRAIL
City-State-Zip: JACKSONVILLE FL 32225

Title A
Name PRIDHAM, DIVINA
Address 10612 FORT CAROLINE RD
City-State-Zip: JACKSONVILLE FL 32225

Title PRESIDENT ELECT & ADVISOR
Name VIRAY, DAPHNE
Address 4434 ARCH CREEK DRIVE
City-State-Zip: JACKSONVILLE FL 32257

Title ADVISOR
Name CUEVAS, LILIBETH
Address 9380 TRAMORE GLEN CT
City-State-Zip: JACKSONVILLE FL 32256

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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: GERMINA EMILY RIO

PRESIDENT

06/11/2020

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title ADVISORY
Name CALLAO, VELIA
Address 8321 PEPPERWOOD DRIVE
City-State-Zip: JACKSONVILLE FL 32244

Title ADVISOR
Name DEVERA, ROMY
Address 13109 AEGEAN DRIVE
City-State-Zip: JACKSONVILLE FL 32246