## 2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N15000001292

Entity Name: FLORIDA ORGANIZATION OF NURSING LEADERSHIP,

FOUNDATION, INC

**Current Principal Place of Business:** 

7380 W SAND LAKE ROAD, STE 500 ORLANDO, FL 32819

**Current Mailing Address:** 

7380 W SAND LAKE ROAD, STE 500 ORLANDO, FL 32819 US

FEI Number: 47-2945053 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATE CREATIONS NETWORK, INC. 801 US HIGHWAY 1 NORTH PALM BEACH, FL 33408 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

**FILED** Apr 16, 2024

**Secretary of State** 

9815215121CC

Officer/Director Detail:

Title **TREASURER** Title **PRESIDENT** 

Name NELSKI, DANIELLE Name BAILEY, BABETTE

Address 7380 W SAND LAKE ROAD Address 7380 W SAND LAKE ROAD, STE 500

> STE 500 City-State-Zip:

ORLANDO FL 32819 City-State-Zip: ORLANDO FL 32819

Title **EXECUTIVE ASSISTANT** Title **SECRETARY** Name FREGONESE, DIANE

Name NICHOLAS, JASMINE Address 7380 W SAND LAKE ROAD, STE 500

Address 7380 W SAND LAKE ROAD City-State-Zip: ORLANDO FL 32819 STE 500

ORLANDO FL 32819 City-State-Zip:

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.

Electronic Signature of Signing Officer/Director Detail

SIGNATURE: BABETTE BAILEY

**PRESIDENT** 

04/16/2024