

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N39895

Entity Name: ASSOCIATION OF OPERATING ROOM NURSES OF THE PALM BEACHS, FLORIDA, INC.

FILED
Apr 29, 2013
Secretary of State
CC3854265013

Current Principal Place of Business:

9222 SE DUNCAN ST.
HOBE SOUND, FL 33455

Current Mailing Address:

9222 SE DUNCAN ST.
HOBE SOUND, FL 33455 US

FEI Number: 65-0169446

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BURNS, LAEL J
9222 SE DUNCAN ST.
HOBE SOUND, FL 33455 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 PRES
Name COLIA, JEANNE
Address 2424 24TH LANE
City-State-Zip: PALM BEACH GARDEN FL 33418

Title ST
Name GLILNSKI, HELEN
Address 6940 43RD TERRACE
City-State-Zip: WEST PALM BEACH FL 33404

Title T
Name BURNS, LAEL
Address 9222 SE DUNCAN ST.
City-State-Zip: HOBE SOUND FL 33455

Title B
Name GLINSKI, HELEN
Address 6940 43RD TERRACE
City-State-Zip: WEST PALM BEACH FL 33404

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: LAEL BURNS

TREASURER

04/29/2013

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date