## 2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N39895

Entity Name: ASSOCIATION OF OPERATING ROOM NURSES OF THE PALM

BEACHS, FLORIDA, INC.

**Current Principal Place of Business:** 

284 KENSINGTON WAY WELLINGTON, FL 33414-4316

**Current Mailing Address:** 

284 KENSINGTON WAY

WELLINGTON, FL 33414-4316 US

FEI Number: 65-0169446 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RAGOSA, MERRIE 18929 SE HILLCREST DRIVE TEQUESTA, FL 33469 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: MERRIE RAGOSA 04/25/2021

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title PRES Title ST

NameWRIGHT, NICOLENameFOCKLER, ANDREAAddress284 KENSINGTON WAYAddress902 TURNER QUAYCity-State-Zip:WELLINGTON FL 33414-4316City-State-Zip:JUPITER FL 33458-4340

Title T Title B

Name RAGOSA, MERRIE Name BURNS, LAEL J

Address 18959 SE HILLCREST DRIVE Address 2705 SW REGENCY RD City-State-Zip: TEQUESTA FL 33469 City-State-Zip: STUART FL 34997

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: NICOLE WRIGHT

**PRESIDENT** 

04/25/2021

FILED Apr 25, 2021

**Secretary of State** 

7150348013CC