

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 572146

FILED
Apr 01, 2009
Secretary of State

Entity Name: CURRENT REVIEWS FOR NURSE ANESTHETISTS, INC.

Current Principal Place of Business:

1828 SE FIRST AVENUE
FORT LAUDERDALE, FL 33316 US

New Principal Place of Business:

Current Mailing Address:

1828 SE FIRST AVENUE
FORT LAUDERDALE, FL 33316 US

New Mailing Address:

FEI Number: 59-1821258

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOYA, FRANK
1828 SE FIRST AV
FORT LAUDERDALE, FL 33316 US

Name and Address of New Registered Agent:

MOYA, FRANK M.D.
1828 SE FIRST AV
FORT LAUDERDALE, FL 33316 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: FRANK MOYA

04/01/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MOYA, FRANK
Address: 1828 SE FIRST AVE
City-St-Zip: FORT LAUDERDALE, FL 33316

Title: DS () Delete
Name: MCNULTY, JOAN
Address: 1828 SE FIRST AVENUE
City-St-Zip: FORT LAUDERDALE, FL 33316

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MOYA, FRANK M.D.
Address: 1828 SE FIRST AVE
City-St-Zip: FORT LAUDERDALE, FL 33316

Title: DS (X) Change () Addition
Name: MCNULTY, JOAN
Address: 1828 SE FIRST AVENUE
City-St-Zip: FORT LAUDERDALE, FL 33316

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOAN MCNULTY

D

04/01/2009

Electronic Signature of Signing Officer or Director

Date