2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2011
Secretary of State

DOCUMENT# 769914

Entity Name: FLORIDA NURSES' FOUNDATION, INC.

Current Principal Place of Business:

1235 E. CONCORD ST.
ORLANDO, FL 32803

New Principal Place of Business:

Current Mailing Address:

1235 E. CONCORD ST.
ORLANDO, FL 32803

New Mailing Address:

FEI Number: 59-2395148 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FULLER, WILLA H
1235 E. CONCORD ST
ORLANDO, FL 32803 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: P
Name: MIRABELLA, REGINA
Address: 12860 HONEYBROOK DRIVE
City-St-Zip: HUDSON, FL 34669

Title: T
Name: RIO, GERMINA
Address: 2343 HUCKINS COURT
City-St-Zip: JACKSONVILLE, FL 32225

Title: S
Name: FULLWOOD, KAY
Address: 2345 LUANA DRIVE EAST
City-St-Zip: JACKSONVILLE, FL 32246

Title: V
Name: POLK, MARYDELLE
Address: 7631 CAMERON CIRCLE
City-St-Zip: FT. MYERS, FL 33912

Title: ED
Name: FULLER, WILLA H
Address: 1235 E. CONCORD STREET
City-St-Zip: ORLANDO, FL 32803

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: WILLA FULLER ED 04/29/2011
Electronic Signature of Signing Officer or Director Date