F0000003844

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COVER LETTER

Division of Corporations			
SUBJECT: National Gerontological Nursing Association, Inc.			
(Name of Corporation)			
DOCUMENT NUMBER: F00000003844			
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
•	· ·		
Jon A. Dancy			
(Name of Contact Person)			
National Gerontological Nursing Association, Inc.			
National Gerontological Nursing Association, Inc. (Firm/Company)			
•			
7794 Grow Drive			
(Address)			
<i>'</i>			
Pensacola, FL 32514			
(City/State and Zip Code)			
For further information concerning this matter, please call:			
Ion A. Doney	050 472 4474		
Jon A. Dancy (Name of Contact Person)	t (850) 473-1174 (Area Code & Daytime Telephone Number)		
(**************************************	(sout as 2 a) time receptions (values)		
Enclosed is a \$35.00 check made payable to the Department of State.			
Mailing Address:	Street Address:		
Mailing Address: Amendment Section	Street Address: Amendment Section		
Division of Corporations	Division of Corporations		
P.O. Box 6327	Clifton Building		
Tallahassee, FL 32314	2661 Executive Center Circle		
	Tallahassee, FL 32301		

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	ange is submitted for a corporation organ	12, 607.1508, or 617.1508, Florida Statutes, this nized under the laws of the State of Maryland ered agent, or both, in the State of Florida.	
1. The name of	the corporation: National Gerontological	Nursing Association, Inc.	
	office address: 7794 Grow Drive, Pensa		
3. The mailing a	address (if different):		
4. Date of incor		Document number: F0000003844	
	d street address of the current registered a rtment of State:	gent and registered office on file with the	
	Puetz, Belinda E. PhD, RN	156 S	
	7794 Grow Drive	JIN 22 PM SEEF, FI	
	Pensacola, FL 32514	SSE CO	
6. The name and (if changed):	d street address of the new registered ager	nt (if changed) and /or registered office	
•	7794 Grow Drive		
	(P.O. Box NOT acceptable)	
	Pensacola, FL 32514		
The street address changed will	ess of its registered office and the street be identical.	address of the business office of its registered agent,	
Such change was authorized by the	as authorized by resolution duly adopted the board, or the corporation has been no	d by its board of directors or by an officer so stiffed in writing of the change.	
	ure of an officer or director)	Belinda E. Puetz, PhD, RN, Executive Director (Printed or typed name and title)	
I hereby accept I further agree of my duties, ar document is bet corporation ha	the appointment as registered agent an to comply with the provisions of all stat ad I am familiar with and accept the obl ing filed merely to reflect a change in th s been notified in writing of this change	nd agree to act in this capacity, utes relative to the proper and complete performance ligation of my position as registered agent. Or, if this te registered office address, I hereby confirm that the	
Son	& Canch	June 20, 2006	
(Si	gnature of Registered Agent)	(Date)	
If signing on be	shalf of an entity:		
Jon A. Dancy			
(T	Typed or Printed Name)		
* * * FILING FEE: \$35.00 * * *			

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314