2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 12, 2002 8:00 AM
Secretary of State

DOCUMENT# F00000005043

Entity Name: THE AMERICAN ASSOCIATION OF NURSE ATTORNEYS FOUNDATION, INC.

Current Principal Place of Business:

7794 GROW DRIVE
PENSACOLA, FL 325147072

New Principal Place of Business:

Current Mailing Address:

7794 GROW DRIVE
PENSACOLA, FL 325147072

New Mailing Address:

FEI Number: 52-1396728 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PUETZ, BELINDA E PHD RN
7794 GROW DRIVE
PENSACOLA, FL 325147072

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	( ) Delete
Name:	BROOKE, PENNY	
Address:	2879 JENNIE LANE	
City-St-Zip:	SALT LAKE CITY, UT 84117	
Title:	S	( ) Delete
Name:	AUSTIN, SALLY	
Address:	1105 SANCTUARY PKWY., SUITE 400	
City-St-Zip:	ALPHARETTA, GA 30004	
Title:	T	( ) Delete
Name:	BOULAY, D M	
Address:	18 MID OAKS LANE	
City-St-Zip:	ROSEVILLE, MN 55113	
Title:	TRST	( ) Delete
Name:	TROTT, M. JEANNE	
Address:	155 MYRTLE STREET	
City-St-Zip:	MANCHESTER, NH 03104	
Title:	TRST	( ) Delete
Name:	MURTHA, RENA	
Address:	20 SCENIC DRIVE	
City-St-Zip:	SUFFERN, NY 10901	
Title:	TRST	( ) Delete
Name:	GANSHEINER, ANDREA	
Address:	835 HOMER AVE	
City-St-Zip:	PALO ALTO, CA 94301	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	TRST	(X) Change ( ) Addition
Name:	KJERVIK, DIANE	
Address:	106 PORTSMITH PLACE	
City-St-Zip:	CHAPEL HILL, NC 27516	
Title:	TRST	(X) Change ( ) Addition
Name:	BEALL, ELIZABETH	
Address:	103 GREENWOOD DRIVE	
City-St-Zip:	MORGANTOWN, VA 26505	
Title:	TRST	(X) Change ( ) Addition
Name:	EDWARDS, ELIZABETH A	
Address:	2604 LAUREL VALLEY GARTH	
City-St-Zip:	ABINGTON, MD 21009	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BELINDA E. PUETZ DR. 03/12/2002

Electronic Signature of Signing Officer or Director — Date