

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000000860

FILED
Jan 21, 2011
Secretary of State

Entity Name: SOCIETY OF PEDIATRIC NURSES, INC.

Current Principal Place of Business:

7794 GROW DR
PENSACOLA, FL 325147072

New Principal Place of Business:

Current Mailing Address:

7794 GROW DR
PENSACOLA, FL 325147072

New Mailing Address:

FEI Number: 68-0229220

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DANCY, JON A
7794 GROW DR
PENSACOLA, FL 325147072 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: ARNOW, DEBBIE
Address: 3401 WEST END AVE, STE. 460
City-St-Zip: NASHVILLE, TN 37203

Title: VP
Name: WIGGINS, SHIRLEY
Address: 4100 EAGLE RIDGE ROAD
City-St-Zip: LINCOLN, NE 68516 US

Title: S
Name: ETZEL-HARDMAN, DANA
Address: 4895 EAST WILLOCK ROAD
City-St-Zip: PITTSBURGH, PA 15227 US

Title: T
Name: PUGH, KAREN
Address: 18745 SEABISCUIT RUN
City-St-Zip: YORBA LINDA, CA 92886 US

Title: D
Name: BROWN, LUCINDA
Address: 760 PINEHURST DR
City-St-Zip: TIPP CITY, OH 45404 US

Title: D
Name: TAYLOR, TANGULA
Address: 2118 VENEZIA DR.
City-St-Zip: PEARLAND, TX 77581 US

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: JON A. DANCY

CEO

01/21/2011

Electronic Signature of Signing Officer or Director

Date