

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000004148

FILED
Jan 12, 2008
Secretary of State

Entity Name: AMERICAN RADIOLOGICAL NURSES ASSOCIATION, INC.

Current Principal Place of Business:

7794 GROW DRIVE
PENSACOLA, FL 32514

New Principal Place of Business:

Current Mailing Address:

7794 GROW DRIVE
PENSACOLA, FL 32514

New Mailing Address:

FEI Number: 52-1292273 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DANCY, JON A
7794 GROW DRIVE
PENSACOLA, FL 32514 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: PP () Delete
Name: SNOBY, PAULETTE
Address: 2835 ROXBURGH DRIVE
City-St-Zip: ROSWELL, GA 30076

Title: D () Delete
Name: MCSORLEY, TIMOTHY
Address: 5260 LAKE ROAD
City-St-Zip: NEWFIELD, NJ 08344

Title: P () Delete
Name: GLICKMAN, PATRICK
Address: 145 MEADOWLAND DRIVE
City-St-Zip: COLLEGEVILLE, PA 19426

Title: D () Delete
Name: GIRARD, VIRGINIA
Address: 84 MONTICELLO DRIVE
City-St-Zip: ERIAL, NJ 08087

Title: PE () Delete
Name: SCHEFFER, KATHY
Address: 932 MILITARY ROAD EAST
City-St-Zip: TACOMA, WA 98445

Title: T () Delete
Name: DENZ, DIANA
Address: 101 EASY STREET
City-St-Zip: CHAPEL HILL, NC 27516

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SCHEFFER, KATHY
Address: 932 MILITARY RD EAST
City-St-Zip: TACOMOA, WA 98445 US

Title: PE (X) Change () Addition
Name: LEHMANN, SHARON
Address: 730 STINSON BLVD, UNIT 123
City-St-Zip: MINNEAPOLIS, MN 55413 US

Title: PP (X) Change () Addition
Name: GLICKMAN, PATRICK
Address: 145 MEADOWLAND DRIVE
City-St-Zip: COLLEGEVILLE, PA 19426 US

Title: T (X) Change () Addition
Name: DENZ, DIANA
Address: 101 EASY STREET
City-St-Zip: CHAPEL HILL, NC 27516 US

Title: S (X) Change () Addition
Name: MCSORLEY, TIMOTHY
Address: 5260 LAKE ROAD
City-St-Zip: NEWFIELD, NJ 08344 US

Title: M (X) Change () Addition
Name: GIRARD, VIRGINIA
Address: 84 MONTICELLO DRIVE
City-St-Zip: ERIAL, NJ 08087 US

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JENNIFER CALLAN

D

01/12/2008

Electronic Signature of Signing Officer or Director

_____ Date