

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000111115

**FILED**  
**Mar 31, 2012**  
**Secretary of State**

**Entity Name:** INTERNATIONAL NURSE COACH ASSOCIATION, L.L.C.

**Current Principal Place of Business:**

640 N.E. 124TH STREET  
NORTH MIAMI, FL 33161

**New Principal Place of Business:**

**Current Mailing Address:**

640 N.E. 124TH STREET  
NORTH MIAMI, FL 33161

**New Mailing Address:**

**FEI Number:** 27-2408419

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

LUCK, SUSAN J  
640 N.E. 124TH STREET  
NORTH MIAMI, FL 33161 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

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM  
**Name:** LUCK, SUSAN J  
**Address:** 10180 WEST BAY HARBOR DR #4-C  
**City-St-Zip:** BAY HARBOR ISLANDS, FL 33154

**Title:** MGRM  
**Name:** GULINO SCHAUB, BONNEY  
**Address:** 2 MURRAY COURT  
**City-St-Zip:** HUNTINGTON, NY 11743

**Title:** MGRM  
**Name:** DOSSEY, BARBARA  
**Address:** 878 PASEO DEL SUR  
**City-St-Zip:** SANTA FE, NM 87501

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

**SIGNATURE:** SUSAN J. LUCK

MGRM

03/31/2012

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date