

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 25, 2002 8:00 am
Secretary of State

03-25-2002 90154 035 ****61.25

DOCUMENT # N00000001920

1. Entity Name:

PHILIPPINE NURSES ASSOCIATION OF GULFCOAST FLORIDA, INC.

Principal Place of Business

**4536 UZZLE WAY
 NEW PORT RICHEY FL 34653**

Mailing Address

**4536 UZZLE WAY
 NEW PORT RICHEY FL 34653**

00048866



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2951 EAGLES NEST DRIVE

Suite, Apt. #, etc.

PALM HARBOR, FLORIDA

City & State

3. Mailing Address

2951 EAGLES NEST DRIVE

Suite, Apt. #, etc.

PALM HARBOR, FLORIDA

City & State

4. FEI Number

59-3617815

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

Zip **34683**

Country **USA**

Zip **34683**

Country **USA**

6. Name and Address of Current Registered Agent

**STEIN, HEIDI
 1980 SWAN LN.
 PALM HARBOR FL 34683**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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.

X SIGNATURE *Heidi Stein*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

03-11-02

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

TITLE **D** ☒ Delete
 NAME **RAVI, TITA**
 STREET ADDRESS **8820 BELMEADOW WAY**
 CITY-ST-ZIP **NEW PORT RICHEY FL 34652**

TITLE **D** ☒ Delete
 NAME **DY, ROSE**
 STREET ADDRESS **8820 BELMEADOW WAY**
 CITY-ST-ZIP **NEW PORT RICHEY FL 34652**

TITLE **D** ☐ Delete
 NAME **SANTOS-MEDENILLA, CECILE M**
 STREET ADDRESS **8820 BELMEADOW WAY**
 CITY-ST-ZIP **NEW PORT RICHEY FL 34652**

TITLE **D** ☒ Delete
 NAME **MOLINO, CARMELITA**
 STREET ADDRESS **8820 BELMEADOW WAY**
 CITY-ST-ZIP **NEW PORT RICHEY FL 34652**

TITLE **D** ☒ Delete
 NAME **SANTOS, AGNES M**
 STREET ADDRESS **8820 BELMEADOW WAY**
 CITY-ST-ZIP **NEW PORT RICHEY FL 34652**

TITLE **D** ☒ Delete
 NAME **BAKER, ADELWISA**
 STREET ADDRESS **8820 BELMEADOW WAY**
 CITY-ST-ZIP **NEW PORT RICHEY FL 34652**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **P** ☒ Change ☐ Addition
 NAME **RAVI, TITA**
 STREET ADDRESS **2951 EAGLES NEST DRIVE**
 CITY-ST-ZIP **PALM HARBOR, FLORIDA 34683**

TITLE **D** ☐ Change ☒ Addition
 NAME **ESTAMPADOR, ESTHER**
 STREET ADDRESS **2951 EAGLES NEST DRIVE**
 CITY-ST-ZIP **PALM HARBOR, FLORIDA 34683**

TITLE **D** ☐ Change ☒ Addition
 NAME **LEWIS, MERLE**
 STREET ADDRESS **2951 EAGLES NEST DRIVE**
 CITY-ST-ZIP **PALM HARBOR, FLORIDA 34683**

TITLE **D** ☒ Change ☐ Addition
 NAME **CECILIA S. MEDENILLA**
 STREET ADDRESS **2951 EAGLES NEST DRIVE**
 CITY-ST-ZIP **PALM HARBOR, FLORIDA 34683**

TITLE **D** ☐ Change ☒ Addition
 NAME **NAVARRO, MA. Janna**
 STREET ADDRESS **2951 EAGLES NEST DRIVE**
 CITY-ST-ZIP **PALM HARBOR, FL. 34683**

TITLE **D** ☐ Change ☒ Addition
 NAME **SANTOS, MERLY**
 STREET ADDRESS **2951 EAGLES NEST DRIVE**
 CITY-ST-ZIP **PALM HARBOR, FL. 34683**

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *TITA E. RAVI*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

03-08-02

Date

(327) 784-3683

Daytime Phone #

CR2E037 (9/01)

B0048866

PHILIPPINE NURSES ASSOCIATION OF GULFCOAST, FL. INC.
2951 Eagles Nest Drive, Palm Harbor, Fl. 34683

Attachment
N00000000920

To whom it may concern,

Enclosed is a separate sheet with the listing of all the officers and directors for the current term.

President - Tita Edralin Ravi

President
Elect - Evangeline Pagulayan

Vice
President - Heidi Stein

Recording
Secretary - Ma. Bella B. Cabrera

Corresponding
Secretary - Lola Pollack

Treasurer - Coraluz I. Timoteo

Advisor - Dr. Rica Cua

Board of Directors

Esther Estampador
Merly Lewis
Cecile S. Medenilla
Janua Coeli F. Navarro
Merly Santos