

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000008277

FILED  
Jun 06, 2005  
Secretary of State

Entity Name: NURSE ALLIANCE OF FLORIDA, INC.

## Current Principal Place of Business:

1525 NW 167 STREET  
120  
MIAMI, FL 33169

## New Principal Place of Business:

1521 ALTON ROAD  
551  
MIAMI BEACH, FL 33139

## Current Mailing Address:

1525 NW 167 STREET  
120  
MIAMI, FL 33169

## New Mailing Address:

1521 ALTON ROAD  
551  
MIAMI BEACH, FL 33139

FEI Number: 56-2417124      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

## Name and Address of Current Registered Agent:

RICHARD, MARK  
PHILLIPS, RICHARD & RIND  
6950 N KENDALL DR  
MIAMI, FL 33156 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: PD ( ) Delete  
Name: BAKER, MARTHA  
Address: 1525 NW 167 STREET  
City-St-Zip: MIAMI, FL 33169

Title: VD ( ) Delete  
Name: VAN SANT, LAURA  
Address: 1525 NW 167 STREET  
City-St-Zip: MIAMI, FL 33169

Title: SD ( ) Delete  
Name: GENUING, FRANK  
Address: 1525 NW 167 STREET  
City-St-Zip: MIAMI, FL 33169

Title: TD ( ) Delete  
Name: SANCHEZ, MARIA  
Address: 1525 NW 167 STREET  
City-St-Zip: MIAMI, FL 33169

Title: D ( ) Delete  
Name: PETTITT, SHERYL  
Address: 1525 NW 167 STREET  
City-St-Zip: MIAMI, FL 33169

Title: D ( ) Delete  
Name: DAWSON, JULIA  
Address: 1525 NW 167 STREET  
City-St-Zip: MIAMI, FL 33169

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: BAKER, MARTHA RN  
Address: 1521 ALTON ROAD #551  
City-St-Zip: MIAMI BEACH, FL 33139

Title: VD (X) Change ( ) Addition  
Name: VAN SANT, LAURA SW  
Address: 1521 ALTON ROAD #551  
City-St-Zip: MIAMI BEACH, FL 33139

Title: SD (X) Change ( ) Addition  
Name: ROGERS, SUSAN RN  
Address: 1521 ALTON ROAD #551  
City-St-Zip: MIAMI BEACH, FL 33139

Title: TD (X) Change ( ) Addition  
Name: SANCHEZ, MARIA RN  
Address: 1521 ALTON ROAD #551  
City-St-Zip: MIAMI BEACH, FL 33139

Title: D (X) Change ( ) Addition  
Name: PALATNICK, ALICE RN  
Address: 1521 ALTON ROAD #551  
City-St-Zip: MIAMI BEACH, FL 33139

Title: D (X) Change ( ) Addition  
Name: SMITH, SHARELL RN  
Address: 1521 ALTON ROAD #551  
City-St-Zip: MIAMI BEACH, FL 33139

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: MARTHA BAKER

PD

06/06/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date