2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000009253

FILED Apr 11, 2011 Secretary of State

Entity Name: FLORIDA ASSOCIATION OF PUBLIC HEALTH NURSES, INC.

Current Principal Place of Business: New Principal Place of Business:

144 DURANCE DRIVE 144 DURANCE DRIVE

FLINTSTONE, GA 30725 FLINTSTONE, GA 30725 US

Current Mailing Address: New Mailing Address:

P.O. BOX 22994

FT. LAUDERDALE, FL 33335

FEI Number: 56-2339603 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

CRAWFORD, SUSAN 6650 SAWYER SHORES LANE WINDERMERE, FL 34786 US

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.

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SIGNATURE:

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Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Γitle: DP

Name: BENTON-BROWN, NAOMI

Address: 6475 W. OAKLAND PARK BLVD #307 City-St-Zip: FORT LAUDERDALE, FL 33313 US

Title: DPE

 Name:
 HUNTER, HANNA

 Address:
 2190 BAYBERRY DRIVE

 City-St-Zip:
 PEMBROKE PINES, FL 33024 US

Title: DPP

Name: WHETSELL, CYNTHIA
Address: 216 PEBBLE BEACH CIRCLE
City-St-Zip: NAPLES, FL 34113 US

Title: DSIN

Name: SUMNER, DEANNA
Address: 2937 UNITY TREE DRIVE
City-St-Zip: EDGEWATER, FL 32141

Title: DT

Name: KANE-CRAWFORD, AMALIA Address: 144 DURANCE DRIVE City-St-Zip: FLINTSTONE, GA 30725

Title: 1VP

Name: CURRY, KIM

Address: 7902 SPRING VALLEY DRIVE

City-St-Zip: TAMPA, FL 33615

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: AMALIA KANE-CRAWFORD TREA 04/11/2011

Electronic Signature of Signing Officer or Director

Date