

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03503

FILED
Mar 05, 2007
Secretary of State

Entity Name: THE JAMAICA NURSES' ASSOCIATION OF FLORIDA, INC.

Current Principal Place of Business:

15500 SW 106 AVENUE
MIAMI, FL 33157

New Principal Place of Business:

17405 SW, 108CT
MIAMI, FL 33157

Current Mailing Address:

PO BOX 695177
MIAMI, FL 33269

New Mailing Address:

17405 SW, 108CT
MIAMI, FL 33157

FEI Number: 59-2424021

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HEWELL, GEORGE
11124 SW 158 TERRACE
MIAMI, FL 33157 US

Name and Address of New Registered Agent:

BRENNAN, LUIE
19930 NW, 8ST,
PEMBROOK PINES, FL 33029 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.

SIGNATURE: BEVERLIN ALLEN

03/05/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BEVERLIN, ALLEN
Address: 17405 SW 108TH CT
City-St-Zip: MIAMI, FL 33157

Title: VP () Delete
Name: FRENCH-HARDING, CONSTANCE
Address: 6011 SW 35TH ST
City-St-Zip: MIRAMAR, FL 33023

Title: S () Delete
Name: RAYMORE, MARJORIE
Address: 1440 SW 87TH WAY
City-St-Zip: PEMBROKE PINES, FL 33025

Title: T () Delete
Name: WALLACE, MOLLY
Address: 2838 SW 177 AVENUE
City-St-Zip: MIRAMAR, FL 33029

Title: AT () Delete
Name: FINDLEY, MAROLYN
Address: 16226 SW 7TH ST
City-St-Zip: PEMBROKE PINES, FL 33027

Title: AS () Delete
Name: HOWARD, JOAN
Address: 8735 SW 154 CIRCLE PLACE
City-St-Zip: MIAMI, FL 33193

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: HOWAD, JOAN
Address: 8753 SW 154 CIRCLE PL
City-St-Zip: MIAMI, FL 33193

Title: S (X) Change () Addition
Name: COOMBS, DOREEN
Address: 9270 SW146 CT.
City-St-Zip: MIAMI, FL 33186

Title: T (X) Change () Addition
Name: HUMES, ESTHER
Address: 3550 NW 181 ST.
City-St-Zip: MIAMI, FL 33056

Title: AT (X) Change () Addition
Name: LAWRENCE, AMYER
Address: 17781 SW 114 AVE
City-St-Zip: MIAMI, FL 33157

Title: AS (X) Change () Addition
Name: PATTERSON, GEORGETTE
Address: 17781 SW 114 AVE
City-St-Zip: MIAMI, FL 33157

I hereby certify that the information supplied with this filing does not qualify for the 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: BEVERLIN ALLEN

P

03/05/2007

Electronic Signature of Signing Officer or Director

Date