

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000009556

FILED
Jan 23, 2011
Secretary of State

Entity Name: EXCEPTIONAL NURSE, INC.

Current Principal Place of Business:

13019 COASTAL CIR.
PALM BCH GARDENS, FL 33410

New Principal Place of Business:

Current Mailing Address:

13019 COASTAL CIR.
PALM BCH GARDENS, FL 33410

New Mailing Address:

FEI Number: 65-1154875

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 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
Name: MAHEADY, DONNA C
Address: 13019 COASTAL CIR.
City-St-Zip: PALM BCH GARDENS, FL 33410

Title: VD
Name: WINLAND-BROWN, JILL E
Address: 13019 COASTAL CIR.
City-St-Zip: PALM BCH GARDENS, FL 33410

Title: SD
Name: FLEMING, SUSAN
Address: 13019 COASTAL CIR.
City-St-Zip: PALM BCH GARDENS, FL 33410

Title: TD
Name: FOLDEN, SUSAN
Address: 13019 COASTAL CIR.
City-St-Zip: PALM BCH GARDENS, FL 33410

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: DONNA C. MAHEADY, PRESIDENT

DR.

01/23/2011

Electronic Signature of Signing Officer or Director

Date