

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000011489

FILED
Mar 21, 2011
Secretary of State

Entity Name: FEU NURSING ALUMNI FOUNDATION, FLORIDA CHAPTER, INC.

Current Principal Place of Business:

2426 RIDGEMOOR DR
ORLANDO, FL 32828

New Principal Place of Business:

Current Mailing Address:

2426 RIDGEMOOR DR
ORLANDO, FL 32828

New Mailing Address:

FEI Number: 26-1444299

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LALOG, JOSE O JR.
90 BRONSON LANE
PALM COAST, FL 32137 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: P
Name: SANTOS, ERLINDA
Address: 2426 RIDGEMOOR DR
City-St-Zip: ORLANDO, FL 32828

Title: V
Name: MOLAS, PRISCILLA
Address: 10920 SW 117 PL.
City-St-Zip: MIAMI, FL 33186

Title: S
Name: TANDOC, CHRISTINELLI
Address: 3907 COUNTRY PLACE
City-St-Zip: WINTER HAVEN, FL, FL 33880

Title: S
Name: FLORES, NORIE
Address: SR 16 EAST
City-St-Zip: ST. AUGUSTINE, FL

Title: T
Name: TRINIDAD, VIVIAN
Address: 9730 SW 12 ST
City-St-Zip: PEMBROKE PINES, FL 33025

Title: PRO
Name: LIMPIOSO, EDITA
Address: 315 SW 191 AVE
City-St-Zip: PEMBROKE PINES, FL 33029

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: ERLINDA SANTOS

P

03/21/2011

Electronic Signature of Signing Officer or Director

Date