

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000005500

FILED  
Feb 24, 2010  
Secretary of State

**Entity Name:** MULTICULTURAL NURSING ORGANIZATION, INC.

**Current Principal Place of Business:**

39 CALLAO STREET  
PUNTA GORDA, FL 33983

**New Principal Place of Business:**

**Current Mailing Address:**

39 CALLAO STREET  
PUNTA GORDA, FL 33983

**New Mailing Address:**

**FEI Number:** 20-3214332

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

OAKS, DAVID K PA  
407 E MARION AVE STE 101  
PUNTA GORDA, FL 33950 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:** BAPTISTE, NANCY  
**Address:** 39 CALLAO STREET  
**City-St-Zip:** PUNTA GORDA, FL 33983

**Title:** VP  
**Name:** EDWARDS, SYBIL  
**Address:** 2103 LYNX RUN  
**City-St-Zip:** NORTH PORT, FL 34288

**Title:** S  
**Name:** BACCHUS, YVETTE  
**Address:** 3894 JANUARY AVENUE  
**City-St-Zip:** NORTH PORT, FL 34288

**Title:** T  
**Name:** BEYDE, IRENE  
**Address:** 20510 ALBURY DRIVE  
**City-St-Zip:** PORT CHARLOTTE, FL 33954

**Title:** D  
**Name:** TAYLOR, FERDINAND  
**Address:** 1600 VISCAYE DRIVE  
**City-St-Zip:** PORT CHARLOTTE, FL 33952

**Title:** D  
**Name:** WINT, JACQUELINE  
**Address:** 392 ADAIR STREET  
**City-St-Zip:** PORT CHARLOTTE, FL 33954

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:** NANCY BAPTISTE

P

02/24/2010

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

\_\_\_\_\_  
Date