

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000007638

FILED  
Feb 04, 2012  
Secretary of State

**Entity Name:** SOFLA INFUSION NURSES SOCIETY INC

**Current Principal Place of Business:**

500 UNIVERSITY DR.  
CORAL GABLES, FL 33147 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 820503  
PEMBROKE PINES, FL 33082 US

**New Mailing Address:**

137 GALLEON RD  
ISLAMORADA, FL 33036 US

**FEI Number:** 90-0737593

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ETTER, CYNTHIA  
5000 UNIVERSITY DR.  
CORAL GABLES, FL 33147 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:** ETTER, CYNTHIA  
**Address:** P.O. BOX 820503  
**City-St-Zip:** PEMBROKE PINES, FL 33082 US

**Title:** VP  
**Name:** SABATINO-HOLMES, PAM  
**Address:** 8900 N. KENDALL DR.  
**City-St-Zip:** MIAMI, FL 33176 US

**Title:** S  
**Name:** YOUNG, GERTRUDE  
**Address:** 975 BAPTIST WAY  
**City-St-Zip:** HOMESTEAD, FL 33033 US

**Title:** T  
**Name:** VIHLEN, NANCY  
**Address:** 137 GALLEON RD  
**City-St-Zip:** ISLAMORADA, FL 33036 US

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 VIHLEN

T

02/04/2012

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

\_\_\_\_\_  
Date