

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N20323

FILED
Apr 24, 2011
Secretary of State

Entity Name: FLORIDA EMERGENCY NURSES ASSOCIATION, INC.

Current Principal Place of Business:

377 MITNIK DRIVE
DELTONA, FL 32738 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 4127
ENTERPRISE, FL 32725 US

New Mailing Address:

FEI Number: 65-0211927 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

DOMINIKOW, ROLF
377 MITNIK DRIVE
DELTONA, FL 32738 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: HOOVER-MCGARRY, MARI
Address: 1005 NW 10TH ST
City-St-Zip: BOYNTON BEACH, FL 33426 US

Title: TREA
Name: DOMINIKOW, ROLF
Address: 377 MITNIK DRIVE
City-St-Zip: DELTONA, FL 32738 US

Title: SD
Name: FOLEY, ANDI
Address: 4819 LIMERICK DR.
City-St-Zip: TAMPA, FL 33610

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: ROLF DOMINIKOW

TREA

04/24/2011

Electronic Signature of Signing Officer or Director

Date