

2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N44422

FILED
Oct 13, 2006
Secretary of State

Entity Name: FLORIDA LEAGUE FOR NURSING, INC.

Current Principal Place of Business:

P. O. BOX 536985
ORLANDO, FL 328536985 US

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 536985
ORLANDO, FL 328536985 US

New Mailing Address:

3035 LAKEWOOD DRIVE
WESTON, FL 33332 US

FEI Number: 59-3077137 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

AQUILAR-FIGULY, VIOLETA
3035 LAKEWOOD DR
WESTON, FL 33332 US

Name and Address of New Registered Agent:

AQUILAR-FIGULY, VIOLETA
3035 LAKEWOOD DR
WESTON, FL 33332 US

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: AGUILAR-FIGULY, VIOLETA

10/13/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: AQUILAR-FIGULY, VIOLETA
Address: 3035 LAKEWOOD DR
City-St-Zip: WESTON, FL 33332

Title: PD (X) Delete
Name: WASHINGTON-BROWN, LINDA J
Address: PO BOX 172706
City-St-Zip: HIALEAH, FL 33017

Title: TR () Delete
Name: PETZOGELLA, CAROL
Address: 8240 NW 14 ST
City-St-Zip: CORAL SPRINGS, FL 33071

Title: T () Delete
Name: MACDUNGAL, BARBARA
Address: 14631 BALGOWAN RD, #104
City-St-Zip: MIAMI LAKES, FL 33016

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: AGUILAR-FIGULY, VIOLETA
Address: 3035 LAKEWOOD DR
City-St-Zip: WESTON, FL 33332

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: BM (X) Change () Addition
Name: PETZOGELLA, CAROL
Address: 8240 NW 14 ST
City-St-Zip: CORAL SPRINGS, FL 33071

Title: TRES (X) Change () Addition
Name: MACDUNGAL, BARBARA
Address: 14631 BALGOWAN RD, #104
City-St-Zip: MIAMI LAKES, FL 33016

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: VIOLETA AGUILAR FIGULY

DIR

10/13/2006

Electronic Signature of Signing Officer or Director

Date