

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000001053

FILED
Mar 20, 2012
Secretary of State

Entity Name: FORT LAUDERDALE FLORIDA ASSOCIATION OF OCCUPATIONAL HEALTH NURSES, INC.

Current Principal Place of Business:

663 PONCE DE LEON DR.
FT. LAUDERDALE, FL 33316

New Principal Place of Business:

Current Mailing Address:

663 PONCE DE LEON DR.
FT. LAUDERDALE, FL 33316

New Mailing Address:

FEI Number: 65-0927593

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KERLEY, JEFF
ONE NORTH DALE MABRY, 11TH FLOOR
TAMPA, FL 33609 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: WEINSIER, STEPHANIE DNP
Address: 5040 N HILLS DRIVE
City-St-Zip: HOLLYWOOD, FL 33021

Title: T
Name: VOLLER, PAM BSN
Address: 663 PONCE DE LEON DR.
City-St-Zip: FT. LAUDERDALE, FL 33316

Title: S
Name: TRAVIESO, BARBARA BSN
Address: 16734 NW 90 AVE
City-St-Zip: HIALEAH, FL 33018

Title: D
Name: MULLINS, JANICE BSN
Address: 1091 SW 67TH TERRACE
City-St-Zip: PLANTATION, FL 33317

Title: D
Name: JOBS, ZENA BS
Address: 4126 N CIRCLE DR.
City-St-Zip: HOLLYWOOD, FL 33136

Title: VP
Name: VOLLER, PAMELA A
Address: 663 PONCE DE LEON DR
City-St-Zip: FORT LAUDERDALE, FL 33316 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: PAMELA A. VOLLER

T

03/20/2012

Electronic Signature of Signing Officer or Director

Date