2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000096402

City-St-Zip:

Entity Name: THE NURSES GUILD, INC.

FILED Mar 30, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 900 SE 8TH AVENUE 2261 NE 36TH STREET SUITE 104 SUITE 1 DEERFIELD BEACH, FL 33441 LIGHTHOUSE POINT, FL 33064 **Current Mailing Address: New Mailing Address:** 1613 SE 7TH ST 2261 NE 36TH STREET DEERFIELD BEACH, FL 33441 SUITE 1 LIGHTHOUSE POINT, FL 33064 FEI Number: 65-1051466 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: PHILLIPS, KEVIN 1613 SE 7TH ST. DEERFIELD BEACH, FL 33441 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition PHILLIPS, LEE Name: Name: 1613 SE 7TH ST. Address: Address: City-St-Zip: DEERFIELD BEACH, FL 33441 City-St-Zip: Title: PS Title: () Delete () Change () Addition PHILLIPS, KEVIN Name: Name: 2261 NE 36 STREET Address: Address: LIGHTHOUSE POINT, FL 33064 City-St-Zip: City-St-Zip: Title: Title: () Change (X) Addition () Delete Name: THOMAS, RONNIE E Name: 2710 NE 14TH STREET Address: Address:

I hereby certify that the information supplied with this filing does not qualify 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

FORT LAUDERDALE, FL 33304

SIGNATURE: KEVIN R PHILLIPS PRES 03/30/2009