

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000130152

Entity Name: ORLANDO NURSING ACADEMY, INC.

FILED
Apr 27, 2005
Secretary of State

Current Principal Place of Business:

13128 SUMMERTON DR.
ORLANDO, FL 32824

New Principal Place of Business:

13181 SUMMERTON DR.
ORLANDO, FL 32824

Current Mailing Address:

13128 SUMMERTON DR.
ORLANDO, FL 32824

New Mailing Address:

13181 SUMMERTON DR.
ORLANDO, FL 32824

FEI Number: 30-0136552

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FLORES, PEDRO E
13278 SUMMERTON DR.
ORLANDO, FL 32824 US

Name and Address of New Registered Agent:

UZCATEGUI, GERMAN
8838 ABBOSTBURY DRIVE
WINDERMERE, FL 334786 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: GERMAN UZCATEGUI

04/27/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MELENDEZ, ARLETTE
Address: 13128 SUMMERTON DR.
City-St-Zip: ORLANDO, FL 32824

Title: VP (X) Delete
Name: FLORES, PEDRO E
Address: 13278 SUMMERTON DR.
City-St-Zip: ORLANDO, FL 32824

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MELENDEZ, ARLETTE
Address: 13181 SUMMERTON DR.
City-St-Zip: ORLANDO, FL 32824

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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.

SIGNATURE: ARLETTE MELENDEZ

P

04/27/2005

Electronic Signature of Signing Officer or Director

Date