2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2006
Secretary of State

DOCUMENT# P04000119072

Entity Name: NURSE PRACTITIONER SKILLS, INC.

Current Principal Place of Business:

P O BOX 941916
MAITLAND, FL 32794

New Principal Place of Business:

Current Mailing Address:

P O BOX 941916
MAITLAND, FL 32794

New Mailing Address:

FEI Number: 55-0882120 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KATZ, LAWRENCE
341 N MAITLAND AVE STE 120
MAITLAND, FL 32751 US

Name and Address of New Registered Agent:

CRUTCHER, CHRIS
2165 CHIPPEWA TRAIL
MAITLAND, FL 32751 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: CHRIS CRUTCHER 04/25/2006
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DIR ( ) Delete
Name: BOAZ, SANFORD
Address: 14424 ST. GEORGE HILL DRIVE
City-St-Zip: ORLANDO, FL 32828

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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.

SIGNATURE: SANFORD BOAZ DIR 04/25/2006
Electronic Signature of Signing Officer or Director Date