2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000100454

Entity Name: VIRTUAL NURSE, INC.

FILED Mar 31, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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2332 GALIANO STREET SUITE 250

CORAL GABLES, FL 33134 US

New Mailing Address: Current Mailing Address:

2332 GALIANO STREET SUITE 250

CORAL GABLES, FL 33134 US

FEI Number: 51-0598040 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:

SANCHEZ-MEDINA, ROLAND JR SANCHEZ-MEDINA, GONZALEZ & QUESADA, LLP 2333 PONCE DE LEON BLVD STE 302 CORAL GABLES, FL 33134 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: DCFO () Delete KELLY, MARY JOAN Name:

62 STONEY CREEK Address:

City-St-Zip: HILTON HEAD, FL 29928 US

Title: DTS () Delete Name: MAGUIRE, AMELIA REA 2715 TOLEDO STREET Address:

CORAL GABLES, FL 33134 US City-St-Zip:

Title: () Delete BRIAN, KELLY Name:

7108 FAIRWAY DRIVE, SUITE 215 Address:

City-St-Zip: PALM BEACH GARDENS, FL 33418 US

Title: (X) Change () Addition Name: KELLY, MARY JOAN

132 PEMBROKE DRIVE Address:

City-St-Zip: PALM BEACH GARDENS, FL 33418 US

Title: DVP (X) Change () Addition

Name: MAGUIRE, AMELIA REA 2715 TOLEDO STREET Address: CORAL GABLES, FL 33134 US City-St-Zip:

Title: **PCEO** (X) Change () Addition

Name: WILLIAM, KELLY JR. 132 PEMBROKE DRIVE Address:

City-St-Zip: PALM BEACH GARDENS, FL 33418 US

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.

VΡ SIGNATURE: AMELIA REA MAGUIRE 03/31/2009