

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000150228

FILED
May 07, 2007
Secretary of State

Entity Name: SELECT NURSING REGISTRY, INC.

Current Principal Place of Business:

15701 SW 53RD CT
MIRAMAR, FL 33027

New Principal Place of Business:

21301 POWERLINE ROAD
SUITE 309-B
BOCA RATON, FL 33433 US

Current Mailing Address:

15701 SW 53RD CT
MIRAMAR, FL 33027

New Mailing Address:

15701 SW 53RD CT
MIRAMAR, FL 33027 US

FEI Number: 45-0547178

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CREED, ARRY
15701 SW 53RD CT
MIRAMAR, FL 33027 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: CREED, ARRY
Address: 15701 SW 53RD CT
City-St-Zip: MIRAMAR, FL 33027

Title: D () Delete
Name: CREED, ROSE O
Address: 15701 SW 53RD CT
City-St-Zip: MIRAMAR, FL 33027

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPS (X) Change () Addition
Name: CREED, ARRY 95%
Address: 15701 SW 53RD CT
City-St-Zip: MIRAMAR, FL 33027 US

Title: DVP (X) Change () Addition
Name: CREED, ROSE O 5%
Address: 15701 SW 53RD CT
City-St-Zip: MIRAMAR, FL 33027 US

Title: SCTR () Change (X) Addition
Name: CREED, ARRY
Address: 15701 SW 53RD CT
City-St-Zip: MIRAMAR, FL 33027 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.

SIGNATURE: ARRY CREED

PRES

05/07/2007

Electronic Signature of Signing Officer or Director

Date