

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000017779

FILED  
Apr 21, 2008  
Secretary of State

Entity Name: NANCY FRUIN, ARNP, MSN, INC.

**Current Principal Place of Business:**

405 MERIDIAN PLACE  
TALLAHASSEE, FL 32303

**New Principal Place of Business:**

**Current Mailing Address:**

405 MERIDIAN PLACE  
TALLAHASSEE, FL 32303

**New Mailing Address:**

FEI Number: 20-8413494

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

FRUIN, NANCY ARNPMSN  
405 MERIDIAN PLACE  
TALLAHASSEE, FL 32303 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

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

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change (X) Addition  
Name: FRUIN, NANCY  
Address: 405 MERIDIAN PL  
City-St-Zip: TALLAHASSEE, FL 32303

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: NANCY FRUIN

RA

04/21/2008

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date