

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000062485

FILED
Feb 23, 2012
Secretary of State

Entity Name: KIMBERLY ELSEER ADVANCED PRACTICE NURSING SERVICES, P.A.

Current Principal Place of Business:

15254 WILSHIRE CIRCLE SOUTH
PEMBROKE PINES, FL 33027

New Principal Place of Business:

13157 NW 11TH PLACE
SUNRISE, FL 33323

Current Mailing Address:

15254 WILSHIRE CIRCLE SOUTH
PEMBROKE PINES, FL 33027

New Mailing Address:

13157 NW 11TH PLACE
SUNRISE, FL 33323

FEI Number: 27-0617582

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ELSER, KIMBERLY
15254 WILSHIRE CIRCLE SOUTH
PEMBROKE PINES, FL 33027 US

Name and Address of New Registered Agent:

ELSER, KIMBERLY
13157 NW 11TH PLACE
SUNRISE, FL 33323 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

02/23/2012

Date

OFFICERS AND DIRECTORS:

Title: D
Name: ELSEER, KIMBERLY
Address: 13157 NW 11TH PLACE
City-St-Zip: SUNRISE, FL 33323

I hereby 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 all other like empowered.

SIGNATURE: KIMBERLY ELSEER

PRES

02/23/2012

Electronic Signature of Signing Officer or Director

Date