

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P15746

1. Entity Name

NURSEFINDERS, INC.

Principal Place of Business

1701 E LAMAR BLVD
#200
ARLINGTON TX 76006
US

Mailing Address

1701 E LAMAR BLVD
#200
ARLINGTON TX 76006
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

75-1473273

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD
NAME HAGEMEISTER, SHERRY L
STREET ADDRESS 1701 E LAMAR BLVD #200
CITY-ST-ZIP ARLINGTON TX 76011 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE VS
NAME OSTMAN, NEAL
STREET ADDRESS 1701 E LAMAR BLVD #200
CITY-ST-ZIP ARLINGTON TX 76011 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☒ Change ☐ Addition

TITLE C
NAME SINCLAIR, MICHAEL
STREET ADDRESS 156 WEST 56TH STREET, SUITE 1605
CITY-ST-ZIP NEW YORK NY 10019 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE D
NAME COWHERD, J. ANDREW
STREET ADDRESS 156 WEST 56TH STREET, SUITE 1605
CITY-ST-ZIP NEW YORK NY 76011 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE D
NAME KOFFMAN, LORI G.
STREET ADDRESS 425 LEXINGTON BLVD #200
CITY-ST-ZIP NEW YORK NY 10017 ☒ Delete

TITLE AT
NAME CHRIS FRIEDRICH
STREET ADDRESS 1701 EAST LAMAR BLVD. #200
CITY-ST-ZIP ARLINGTON, TX 76006 ☐ Change ☒ Addition

TITLE AS
NAME WENDT, PAMELA
STREET ADDRESS 1701 E LAMAR BLVD #200
CITY-ST-ZIP ARLINGTON TX 76006 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

CHRIS FRIEDRICH

(817) 462-9000

Date

Daytime Phone #

CR2E037 (9/01)