

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P15746

Entity Name: NURSEFINDERS, INC.

FILED
Apr 01, 2010
Secretary of State

Current Principal Place of Business:

524 E LAMAR BLVD
#300
ARLINGTON, TX 76011 US

New Principal Place of Business:

Current Mailing Address:

524 E LAMAR BLVD
#300
ARLINGTON, TX 76011 US

New Mailing Address:

FEI Number: 75-1473273 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324 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: PD
Name: LIVONIUS, ROBERT
Address: 524 E LAMAR BLVD #300
City-St-Zip: ARLINGTON, TX 76011

Title: DS
Name: FRIEDRICHS, CHRIS
Address: 524 E LAMAR BLVD #300
City-St-Zip: ARLINGTON, TX 76011

Title: T
Name: MCCOLPIN, PATRICK
Address: 524 E LAMAR BLVD #300
City-St-Zip: ARLINGTON, TX 76011

Title: D
Name: RUTHERFORD, CHRISTIAN
Address: 3668 S GEYER RD., SUITE 100
City-St-Zip: SUNSET HILLS, MO 63127

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: CHRIS FRIEDRICHS

S

04/01/2010

Electronic Signature of Signing Officer or Director

Date