

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morhart  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P95000017153 (4)

1. Corporation Name

ACCESS NURSING SERVICES, INC.



Principal Place of Business

506 SE FEDERAL HIGHWAY  
STUART FL 34994

Mailing Address

506 SE FEDERAL HIGHWAY  
STUART FL 34994

3. Date Incorporated or Qualified  
03/01/1995

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 506 S FEDERAL HIGHWAY

26 506 S. FEDERAL HIGHWAY

4. FEI Number  
65-0561324

Applied For  
Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 SUITE # 201

27 SUITE # 201

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

City & State

City & State

23 STUART, FL

28 STUART, FL

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

Zip

Country

Zip

Country

24 34994

25

29 34994

30

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

RUMBLE, ALINA  
506 SE FEDERAL HIGHWAY  
STUART FL 34994

81 Name

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

506 S. FEDERAL HIGHWAY

83

SUITE # 201

84

STUART

FL

85 Zip Code  
34994

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Alina Rumble

Alina Rumble, Secretary/Treasurer

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE  
NAME SORDO, ARTURO  
STREET ADDRESS 15976 DOWNALL GREEN  
CITY - ST - ZIP CHESTERFIELD MO 63017

TITLE D ☒ DELETE  
NAME SORDO, ELENA  
STREET ADDRESS 15976 DOWNALL GREEN  
CITY - ST - ZIP CHESTERFIELD MO 63017

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PD ☐ Change ☒ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY - ST - ZIP

2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY - ST - ZIP

3.1 TITLE S/T ☐ Change ☒ Addition  
3.2 NAME ALINA RUMBLE  
3.3 STREET ADDRESS 3247 BESSY CREEK TRAIL  
3.4 CITY - ST - ZIP PALM CRY, FL 34990

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY - ST - ZIP

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Alina Rumble  
ALINA RUMBLE, SECRETARY/TREASURER

(407) 220-3380

CR2E034 (12/95)