

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# S13977

Entity Name: NURSE MATES, INC.

**FILED**  
**Apr 05, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

302 11TH AVE. N.E.  
ST. PETERSBURG, FL 33701

**New Principal Place of Business:**

**Current Mailing Address:**

302 11TH AVE. N.E.  
ST. PETERSBURG, FL 33701

**New Mailing Address:**

2227 22ND STREET SOUTH  
ST. PETERSBURG, FL 33712

FEI Number: 59-3037897

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BERTHELOT, MARLENE C.  
2227-22ND ST SOUTH  
SAINT PETERSBURG, FL 33712 US

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

BERTHELOT, MARLENE  
2227-22ND ST SOUTH  
SAINT PETERSBURG, FL 33712 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: MARLENE BERTHELOT

04/05/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: BERTHELOT, MARLENE C  
Address: 2227 22ND STREET SOUTH  
City-St-Zip: ST. PETERSBURG, FL 33712

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: MARLENE BERTHELOT

MS.

04/05/2011

Electronic Signature of Signing Officer or Director

Date