

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N14000008070

**Entity Name:** INDIAN NURSES ASSOCIATION OF SOUTH FLORIDA INC

**Current Principal Place of Business:**

15120 SW 159CT  
MIAMI, FL 33196

**Current Mailing Address:**

15120 SW 159CT  
MIAMI, FL 33196 US

**FEI Number:** 26-2135684

**Certificate of Status Desired:** No

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

VARKEY , BABY  
15800 PINES BLVD  
SUITE 302  
PEMBROKE PINES, FL 33027 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:** BABY VARKEY

04/17/2018

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name JOHNSON, SHEELA  
Address 15120 SW 159CT  
City-State-Zip: MIAMI FL 33196

Title S  
Name THOMAS, JINOY  
Address 10260 GROVE LANE  
City-State-Zip: COOPER CITY FL 33328

Title TREASURER  
Name SHANU, DIXIE  
Address 3725 NW 85 TERRACE  
City-State-Zip: COOPER CITY FL 33024

*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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** SHEELA JOHNSON

PRESIDENT

04/17/2018

Electronic Signature of Signing Officer/Director Detail

Date