

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000038953

**Entity Name:** TRUST THE NURSE INC.

**Current Principal Place of Business:**

507 MANNS HARBOR DRIVE  
APOLLO BEACH, FL 33572

**Current Mailing Address:**

507 MANNS HARBOR DRIVE  
APOLLO BEACH, FL 33572 US

**FEI Number:** 27-2574647

**Certificate of Status Desired:** No

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

BRANCH, MICHAEL  
788 WEST DR. MARTIN LUTHER KING JR BLVD  
SEFFNER, FL 33584 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:** MICHAEL BRANCH

04/13/2015

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PD  
Name HAND, HEATHER  
Address 507 MANNS HARBOR DRIVE  
City-State-Zip: APOLLO BEACH FL 33572

*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:** HEATHER HAND

PRESIDENT

04/13/2015

Electronic Signature of Signing Officer/Director Detail

Date