## 2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P12000064146

Entity Name: THE NURSE LAWYER, INC.

**Current Principal Place of Business:** 

6623 US HWY 19

NEW PORT RICHEY, FL 34652

**Current Mailing Address:** 

6623 US HWY 19

NEW PORT RICHEY. FL 34652 US

FEI Number: 46-0639036 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MASELLA, MARYANN RESQ. 6623 US HWY 19 NEW PORT RICHEY, FL 34652 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:

Electronic Signature of Registered Agent

Date

FILED Apr 11, 2014

**Secretary of State** 

CC2258694917

## Officer/Director Detail:

Title F

Name MASELLA, MARYANN ESQUIRE

Address 6623 US HWY 19

City-State-Zip: NEW PORT RICHEY FL 34652

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.