

2021 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F20000004981

Entity Name: AMERICAN NURSES' ASSOCIATION, INC.

Current Principal Place of Business:

8515 GEORGIA AVENUE
SUITE 400
SILVER SPRING, MD 20910

Current Mailing Address:

8515 GEORGIA AVENUE
SUITE 400
SILVER SPRING, FL 20910 US

FEI Number: 13-1893923

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LEGALINC CORPORATE SERVICES INC.
5237 SUMMERLIN COMMONS BLVD.
SUITE 400
FORT MYERS, FL 33907 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

Officer/Director Detail :

Title P
Name GRANT, ERNEST
Address 8515 GEORGIA AVENUE, SUITE 400
City-State-Zip: SILVER SPRING MD 20910

Title T
Name MENSİK, JENNIFER
Address 8515 GEORGIA AVENUE, SUITE 400
City-State-Zip: SILVER SPRING MD 20910

Title D
Name WATSON, JEFF
Address 8515 GEORGIA AVENUE, SUITE 400
City-State-Zip: SILVER SPRING MD 20910

Title S
Name PIERCE, STEPHANIE
Address 8515 GEORGIA AVENUE, SUITE 400
City-State-Zip: SILVER SPRING MD 20910

Title D
Name SINGH, VARSHA
Address 8515 GEORGIA AVENUE, SUITE 400
City-State-Zip: SILVER SPRING MD 20910

Title D
Name GIL, JENNIFER
Address 8515 GEORGIA AVENUE, SUITE 400
City-State-Zip: SILVER SPRING MD 20910

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: ERNEST GRANT

PRESIDENT

02/19/2021

Electronic Signature of Signing Officer/Director Detail

Date