

**2019 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F98000004299

**Entity Name:** NATIONAL ASSOCIATION OF RESIDENTS AND INTERNS, INC.

**FILED**  
**Feb 10, 2019**  
**Secretary of State**  
**6985015753CC**

**Current Principal Place of Business:**

550 FAIRWAY DR STE 107  
DEERFIELD BEACH, FL 33441

**Current Mailing Address:**

550 FAIRWAY DR STE 107  
DEERFIELD BEACH, FL 33441 US

**FEI Number: 13-2510078**

**Certificate of Status Desired: No**

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

FURNARI, GIACOMO F  
550 FAIRWAY DR., STE 107  
DEERFIELD BEACH, FL 33441 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            PRESIDENT, DIRECTOR  
Name            FURNARI, GIACOMO F  
Address        550 FAIRWAY DR STE 107  
City-State-Zip: DEERFIELD BEACH FL 33441

Title            VP, DIRECTOR  
Name            PAGONIS, JACQUELINE L  
Address        550 FAIRWAY DR STE 107  
City-State-Zip: DEERFIELD BEACH FL 33441

*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: JACQUELINE PAGONIS**

**VP**

**02/10/2019**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date