No. C 199984  Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  NO FILING FEE IF RECEIVED BY DUE DATE		Due no later than Oct 31, 2017 Annual Report Form  1. Mailing Address: Correct in this box if needed.  FOUNDATION OF THE NATIONAL STUDENT NURSES' ASSOCIATION ROMANA AHMED 45 MAIN ST STE 606 BROOKLYN NY 11201		2. Registered Ag	2. Registered Agent and Address (NO PO BOX)			
				INCORP SERVICES, INC. 1310 S VISTA AVE STE 27 BOISE ID 83705  3. New Registered Agent Signature:*				
1. Corporations: Enter Na	ames and Busin	ess Addresses of Pro	esident, Secretary, and Directors. Treasur	er (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
DIRECTOR	DIANE J. MANCINO		45 MAIN STREET SUITE 606	BROOKLYN	NY	USA	11201	
PRESIDENT	CAROL T. WEINGARTEN		45 MAIN ST STE 606	BROOKLYN	NY		11201	
SECRETARY	LARRY Z. SLATER		45 MAIN ST STE 606	BROOKLYN	NY		11201	
TREASURER	DAVID MEHOK		45 MAIN STREET, STE 606	BROOKLYN	NY	USA	11201	
VICE PRESIDENT	T TINA FILOROMO		45 MAIN STREET, STE 606	BROOKLYN	NY	USA	11201	
DIRECTOR	ROBERT G HESS JR.		45 MAIN STREET, STE 606	BROOKLYN	NY	USA	11201	
DIRECTOR	SANDRA GOMBERG		45 MAIN STREET, STE 606	BROOKLYN	NY	USA	11201	
DIRECTOR	ROSELLA L GARCIA		45 MAIN STREET, STE 606	BROOKLYN	NY	USA	11201	
DIRECTOR	FLORENCE HUEY		45 MAIN STREET, STE 606	BROOKLYN	NY	USA	11201	
DIRECTOR	JENNIFER KA	ALENKOSKI	45 MAIN STREET SUITE 606	BROOKLYN	NY	USA	11201	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
DE		Signature: ROMANA AHMED		Date: 10/11/2017				
C 199984		Name (type or print): ROMANA AHMED		Title: ASSISTANT ACCOUNTANT				
Processed 10/11/2017		* Electronically prov	vided signatures are accepted as original s	signatures.				