



State of Rhode Island  
**Department of State - Business Services Division**

**Annual Report for the year: 2016**  
**Limited Liability Company**

- Filing period: September 1 - November 1
- Filing Fee: \$50.00
- Penalty: Additional \$25.00 fee if form is not filed by December 1.

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2021 AUG 23 A 10:59

1. Entity ID Number <b>001657963</b>		2. Exact name of the Limited Liability Company <b>Gifted Nurses. LLC</b>			
3. NAICS Code 561320		4. Brief description of the character of business conducted in Rhode Island Nurse staffing agency providing travel nurses to acute care facilities			
5. State of Formation LA				State LA	Zip 70002
6. Principal Office Address 2748 Metairie Lawn Drive, Suite B		City Metairie		State LA	Zip 70002
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Mary Kay Molbert		Contact Title COO			
Street Address 2748 Metairie Lawn Drive, Suite B		City Metairie		State LA	Zip 70002
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name Mary Kay Molbert		Manager Name Margaret Candon, RN			
Street Address 2748 Metairie Lawn Drive, Suite B		Street Address 2748 Metairie Lawn Drive, Suite B			
City Metairie	State LA	Zip 70002	City Metairie	State LA	Zip 70002
Manager Name P.K. Scheerle, RN		Manager Name Mullady Voelker			
Street Address 2748 Metairie Lawn Drive, Suite B		Street Address 2748 Metairie Lawn Drive, Suite B			
City Metairie	State LA	Zip 70002	City Metairie	State LA	Zip 70002
Check the box to indicate an attachment <input type="checkbox"/>					
9. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642.					
<i>Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.</i>					
Name of Authorized Person Mary Kay Molbert				Date 8/20/2021	
Signature of Authorized Person 					

**FILED** <sup>m</sup>

**AUG 23 2021**

BY Ms SBIY9  
11:00

**MAIL TO:**  
 Division of Business Services  
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 Website: www.sos.ri.gov