

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K42284

FILED  
Jan 13, 2004  
Secretary of State

**Entity Name:** FLORIDA AERO MEDICAL ASSOCIATION, INCORPORATED

**Current Principal Place of Business:**

2073 SKIMMER COURT WEST #211  
CLEARWATER, FL 33762 US

**New Principal Place of Business:**

6433 FLAMINGO WAY S  
ST. PETERSBURG, FL 33707 US

**Current Mailing Address:**

2073 SKIMMER COURT WEST #211  
CLEARWATER, FL 33762 US

**New Mailing Address:**

6433 FLAMINGO WAY S  
ST. PETERSBURG, FL 33707 US

FEI Number: 59-2941641

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

DELGADO, JUAN E  
2073 SKIMMER COURT WEST #211  
CLEARWATER, FL 33762 US

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

DELGADO, JUAN E  
6433 FLAMINGO WAY S  
ST. PETERSBURG, FL 33707 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:

01/13/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: DELGADO, JUAN E  
Address: 239 S. BAY HARBOR DR  
City-St-Zip: KEY LARGO, FL 33037

Title: ST ( ) Delete  
Name: HUNTER, NANCY  
Address: 2073 SKIMMER COURT W #211  
City-St-Zip: CLEARWATER, FL 33762 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ST (X) Change ( ) Addition  
Name: O'NEILL, NANCY  
Address: 6433 FLAMINGO WAY S  
City-St-Zip: ST. PETERSBURG, FL 33707 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: NANCY O'NEILL

ST

01/13/2004

Electronic Signature of Signing Officer or Director

Date