

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000063101

Entity Name: MED EVAC, LLC

FILED
Apr 26, 2007
Secretary of State

Current Principal Place of Business:

406 NORTH REO STREET, SUITE # 137
TAMPA, FL 33609

New Principal Place of Business:

406 NORTH REO STREET
SUITE # 137
TAMPA, FL 33609

Current Mailing Address:

POST OFFICE BOX 2079
MANGO, FL 335502079 US

New Mailing Address:

FEI Number: 20-1522120

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GRISWOLD, III., E. FRANK
C/O KURPIERS <> HARLAND, P.A., ATTORNEYS
696 - 1ST AVENUE NORTH, SUITE 304
SAINT PETERSBURG, FL 33701 US

Name and Address of New Registered Agent:

GRISWOLD III, E FRANK
C/O KURPIERS LAW FIRM
707 NORTH FRANKLIN STREET, SIXTH FLOOR
TAMPA, FL 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: E FRANK GRISWOLD III

04/26/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: GRISWOLD, III., E FRANK
Address: POST OFFICE BOX 2079
City-St-Zip: MANGO, FL 335502079 US

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: GRISWOLD III, E FRANK
Address: POST OFFICE BOX 2079
City-St-Zip: MANGO, FL 335502079 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: E FRANK GRISWOLD III

MGR

04/26/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date