

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 733862

Entity Name: EMERGENCY MEDICAL ASSISTANCE, INC.

Current Principal Place of Business:

7901 4TH N
STE 300
ST. PETERSBURG, FL 33702

Current Mailing Address:

PO BOX 33552
PALM BEACH GARDENS, FL 33420 US

FEI Number: 51-0198610

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

REGISTERED AGENTS INC
7901 4TH N
STE 300
ST. PETERSBURG, FL 33702 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 PRES
Name STEFFEN, KATHLEEN
Address 7901 4TH N
 STE 300
City-State-Zip: ST. PETERSBURG FL 33702

Title TREASURER
Name SAMUELS, ALEXANDRA
Address 7901 4TH N
 STE 300
City-State-Zip: ST. PETERSBURG FL 33702

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: ALEXANDRA SAMUELS

TREASURER

04/23/2024

Electronic Signature of Signing Officer/Director Detail

Date