2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 745264

Entity Name: FLORIDA AMBULANCE ASSOCIATION, INC.

FILED
Jan 22, 2020
Secretary of State
8261310330CC

Current Principal Place of Business:

1201 WILSON BLVD C/O AMERICAN AMBULANCE ASSOCIATION ARLINGTON, VA 22209

Current Mailing Address:

PO BOX 96503 #72319 WASHINGTON, DC 20090 US

FEI Number: 81-1090900 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GARCIA, ALISSA C/O NATIONAL HEALTH TRANSPORT 2290 NW 110TH AVE. SWEETWATER, FL 33172 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: ALISSA GARCIA 01/22/2020

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title PAST PRESIDENT Title PRESIDENT ELECT SKAVRONECK, ALAN RAMOTAR, TERENCE Name Name PO BOX 96503 #72319 PO BOX 96503 #72319 Address Address City-State-Zip: City-State-Zip: WASHINGTON DC 20090 WASHINGTON DC 20090

 Title
 PRESIDENT
 Title
 TREASURER

 Name
 PETERSON, JOHN
 Name
 MARTIN, HOLLY

 Address
 PO BOX 96503 #72319
 Address
 PO BOX 96503 #72319

 City-State-Zip:
 WASHINGTON DC 20090
 City-State-Zip: WASHINGTON DC 20090

Title ADMINISTRATOR Title SECRETARY
Name RIORDAN, AMANDA Name GARCIA, ALISSA

 Address
 PO BOX 96503 #72319
 Address
 PO BOX 96503 #72319

 City-State-Zip:
 WASHINGTON DC 20090
 City-State-Zip: WASHINGTON DC 20090

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: AMANDA RIORDAN

ADMINISTRATOR

01/22/2020