

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000172816

Entity Name: AMERIPRO EMS OF FLORIDA, LLC

Current Principal Place of Business:

4810 EXECUTIVE PARK CT STE 112
JACKSONVILLE, FL 32216

Current Mailing Address:

4810 EXECUTIVE PARK CT STE 112
JACKSONVILLE, FL 32216 US

FEI Number: 84-2463457

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

CAPITOL CORPORATE SERVICES, INC.
515 E PARK AVE 2ND FLOOR
TALLAHASSEE, FL 32301 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

Authorized Person(s) Detail :

Title AMBR
Name AMERIPRO EMS LLC
Address 4810 EXECUTIVE PARK CT STE 112
City-State-Zip: JACKSONVILLE FL 32216

Title DIRECTOR OF ADMINISTRATION AND COMPLIANCE
Name TURPIN, ANDREW TODD
Address 4810 EXECUTIVE PARK CT STE 112
City-State-Zip: JACKSONVILLE FL 32216

Title COO
Name MCLELLAN, MARVIN
Address 4810 EXECUTIVE PARK CT STE 112
City-State-Zip: JACKSONVILLE FL 32216

Title CEO
Name UPPALAPATI, SUHAS
Address 4810 EXECUTIVE PARK CT STE 112
City-State-Zip: JACKSONVILLE FL 32216

Title EXECUTIVE VICE PRESEDENT
Name RICHARDSON, LARRY
Address 4810 EXECUTIVE PARK CT STE 112
City-State-Zip: JACKSONVILLE FL 32216

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ANDREW TODD TURPIN

**DIRECTOR OF
ADMINISTRATION**

01/25/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date