2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 02, 2023
Secretary of State
8226212087CC

DOCUMENT# L20000193329

Entity Name: ALLCARE MEDICAL TRANSPORT, LLC

Current Principal Place of Business:

4751 E. MOODY BLVD
BLD 5
BUNNELL, FL 32110

Current Mailing Address:

PO BOX 350382
PALM COAST, FL 32137 US

FEI Number: 85-3487958

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HOGAN, MARY M
4751 E. MOODY BLVD
BLD 5
BUNNELL, FL 32110 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	MANAGER, MANAGING MEMBER, PRESIDENT
Name	HOGAN, MARY MELISSA
Address	4751 E. MOODY BLVD BLD 5
City-State-Zip:	BUNNELL FL 32110

Title	VP
Name	MOORE, JACOB BRADLEY
Address	4751 E. MOODY BLVD BLD 5
City-State-Zip:	BUNNELL FL 32110

Title	VP
Name	HOGAN, TIMOTHY R
Address	4751 E. MOODY BLVD BLD 5
City-State-Zip:	BUNNELL FL 32110

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: MARY HOGAN MANAGER 02/02/2023

Electronic Signature of Signing Authorized Person(s) Detail — Date