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Secretary of State

PROFIT CORPORATION ANNUAL REPORT
1998

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 184996

1. Corporation Name
Randle Eastern Ambulance Service, Inc.

Principal Place of Business	Mailing Address

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 2821 S. Parker Rd. Suite, Apt. #, etc. 22 10th Floor City & State 23 Aurora, Colorado Zip 24 80014 Country 25 U.S.A.	2a. Mailing Address 26 2821 S. Parker Rd. Suite, Apt. #, etc. 27 10th Floor City & State 28 Aurora, Colorado Zip 29 80014 Country 30 U.S.A.	3. Date Incorporated or Qualified 5/5/95 4. FEI Number 59-0737717 ☐ Applied For ☐ Not Applicable 5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☒ Yes ☐ No	

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
CT Corporation System 1200 S. Pine Island Road Plantation, Florida 33324	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 600002543276 83 -06/02/98--01014--001 84 City ***150.00 FL d5 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE		1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	☐ Change ☒ Addition D George B. DeHuff III 2821 S. Parker Road, 10th Floor Aurora, Colorado 80014
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE		2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	☐ Change ☒ Addition P/T/AS John Rester 1850 Parkway Place, #810 Marietta, Georgia 30067
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE		3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	☐ Change ☒ Addition VP/S Robert Garner 7255 N.W. 19th Street Miami, Florida 33126
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE		4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	☐ Change ☒ Addition VP/AT Jack Kelleher 7255 N.W. 19th Street Miami, Florida 33126
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE		5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP	☐ Change ☒ Addition VP/AS Joshua T. Gaines 2821 S. Parker Road, 10th Floor Aurora, Colorado 80014
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE		6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP	☐ Change ☒ Addition VP/AS Robert Allen 2821 S. Parker Road, 10th Floor Aurora, Colorado 80014

CR2E034 (10/97)

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: _____ George B. DeHuff III 4/30/98 (303) 614-8500

Randle Eastern Ambulance Service, Inc.
Continued

AS
Susan A. Whittaker

669 Airport Freeway
Suite 400
Hurst, Texas 76053