FILE	NOW: FILING FEE AFTER MAY 1 IS	\$225.00	 -		
	ODATION DE	TMENT OF STATE			
ANNUA	L REPORT Secretar	y of State			
1	996 Division of C	CORPORATIONS	_		
DOCUM 1. Corporation N	ENT#	BUTTO STOC	F		
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Airh	orne Medical Service	es, Inc			
Principal Piace o	in Education				
838 N	reapolitan Way Ste. 30) (
Naple	5, FL. 339 40 '		3. Date Incorporated or Qualified	3a. Date of Last Repor	5
2. Principa: Flac	ce of Business 2a. Mailing Address		4. FEI Number		lied For
21 838 Deapolitan Way 28 P.O. Box 413005 Suite Apt # etc. Suite Apt # etc.			59-184 8 54	\$8.75 Ad	Applicable Iditional
22 301	27 3 0 L City & State		Certificate of Status Desired Election Campaign Financing	Fee Requ	
City & State 23 \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\	les FL. 28 Naples	, FL	Trust Fund Contribution	Added to	Fees
24 Z201	Country 229 3 3941	30 CUSA	This corporation has liability for Florida Statutes Yes	No	199 032,
	9. Name and Address of Current Registered Agent	81 Name 🕥	10. Name and Address of New F	1 _	
	andall J. Latona 38 Neapolitan Way#	301 82 51 95	dres (P.O. Box Number & Not Accept	ationa	
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	38 Neapolitan Way # Japles, FL. 33940	20 83 837	& 301	way	
1	7ap 145, Fr. 55140	84 Cky	oloc Cl	FI 85 2020	940
11. Pursuant lo	The provisions of Sections 607.0502 and 607.1508, Florida Statul	tes, the above-named cor authorized by the corpora	rporation submits this statement for the ation's board of directors. I hereby acc	e purpose of changing its cept the appointment as re	registered egistered
1	the provisions of Sections 607.0502 and 607.1508. Florida Statul g stered agent, or both, in the State of Florida. Such change was familiar with, and accept the Antigations of Section 607.0505. Fi	orida Statutes.		00-01	
SIGNATURE		1. 677000	1	3-8-76	
<u>x</u>	The state of the s	TF Registered Agent signature required		DATE FICERS AND DIRECTORS	
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12. T TLE NAME	P/V/T/D DELETE Randall J. Latona 201	13.	jured when reinstating)	DATE FICERS AND DIRECTORS	
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