2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 09, 2007
Secretary of State

DOCUMENT# 764316

Entity Name: FLORIDA ASSOCIATION OF EMS MEDICAL DIRECTORS, INC.

Current Principal Place of Business:

3717 S CONWAY RD
ORLANDO, FL 32812

New Principal Place of Business:

Current Mailing Address:

3717 S CONWAY RD
ORLANDO, FL 32812

New Mailing Address:

FEI Number: 59-2888283 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BRUNNER, BETH P DIR
3717 S CONWAY RD
ORLANDO, FL 32812 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: BRUNNER, BETH P D
Address: 3717 S CONWAY RD
City-St-Zip: ORLANDO, FL

Title: P ( ) Delete
Name: MCPHERSON, JOHN
Address: 3717 SOUTH CONWAY ROAD
City-St-Zip: ORLANDO, FL 32812

Title: V ( ) Delete
Name: LOZANO, MIKE
Address: 3717 SOUTH CONWAY ROAD
City-St-Zip: ORLANDO, FL 32812

Title: ST ( ) Delete
Name: RALLS, GEORGE
Address: 3717 SOUTH CONWAY ROAD
City-St-Zip: ORLANDO, FL 32812

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: BETH BRUNNER D 02/09/2007

Electronic Signature of Signing Officer or Director — Date