2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 29, 2010
Secretary of State

DOCUMENT# 768812

Entity Name: MANATEE COUNTY EMERGENCY MEDICAL SERVICES AUXILIARY, INCORPORATED

Current Principal Place of Business:

2101 47TH TERRACE EAST
BRADENTON, FL 34203

New Principal Place of Business:

Current Mailing Address:

PO BOX 1000
BRADENTON, FL 34206

New Mailing Address:

FEI Number: 59-2312113 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HESTER, ALICE
4828 TURTLE BAY TERRACE
BRADENTON, FL 34203 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: PD
Name: HESTER, ALICE
Address: 4828 TURTLE BAY TERRACE
City-St-Zip: BRADENTON, FL 34203

Title: DV
Name: DYCE, MATTHEW
Address: 2101 47TH TERRACE E.
City-St-Zip: BRADENTON, FL 34203

Title: DS
Name: BAKER, MINDY
Address: 2101 47TH TERRACE E
City-St-Zip: BRADENTON, FL 34203

Title: DT
Name: MCGUIRE, JON
Address: 2101 47TH TERRACE E
City-St-Zip: BRADENTON, FL 34203

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 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 all other like empowered.

SIGNATURE: ALICE HESTER PA 03/29/2010

Electronic Signature of Signing Officer or Director — Date