2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2009
Secretary of State

DOCUMENT# F00000003849

Entity Name: CJ CRITICAL CARE TRANSPORTATION SYSTEMS OF FLORIDA, INC.

Current Principal Place of Business:

C/O AIR METHODS CORP
7301 S PEORIA ST
ENGLEWOOD, CO 80112

New Principal Place of Business:

Current Mailing Address:

C/O AIR METHODS CORP
7301 S PEORIA ST
ENGLEWOOD, CO 80112

New Mailing Address:

FEI Number: 25-1406130 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: CEO ( ) Delete
Name: TODD, AARON D
Address: 7301 S PEORIA ST
City-St-Zip: ENGLEWOOD, CO 80112

Title: CFO ( ) Delete
Name: CARMAN, TRENT
Address: 17301 S PEORIA ST.
City-St-Zip: ENGLEWOOD, CO 80112

Title: VP ( ) Delete
Name: DOLSTEIN, DAVID
Address: 7301 S PEORIA ST
City-St-Zip: ENGLEWOOD, CO 80112

Title: VP ( ) Delete
Name: ALLEN, MICHAEL
Address: 7301 S PEORIA ST
City-St-Zip: ENGLEWOOD, CO 80112

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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KAY KELLY EA 04/30/2009

Electronic Signature of Signing Officer or Director — Date