2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 19, 2009
Secretary of State

DOCUMENT# F03000001254

Entity Name: MEDAIRE, INC.

Current Principal Place of Business:

80 EAST RIO SALADO PARKWAY STE. 610
TEMPE, AZ 85281

New Principal Place of Business:

Current Mailing Address:

80 EAST RIO SALADO PARKWAY STE. 610
TEMPE, AZ 85281

New Mailing Address:

FEI Number: 86-0528631 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CAPITOL CORPORATE SERVICES, INC.
155 OFFICE PLAZA DR.
SUITE A
TALLAHASSEE, FL 32301 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: WILLIAMS, JAMES
Address: 80 EAST RIO SALADO PARKWAY STE. 610
City-St-Zip: TEMPE, AZ 85281

Title: D ( ) Delete
Name: GARRETT, JOAN
Address: 80 E. RIO SALADO PARKWAY, STE 610
City-St-Zip: TEMPE, AZ 85281

Title: D ( ) Delete
Name: HERBERGER, ROY
Address: 80 EAST RIO SALADO PARKWAY STE. 610
City-St-Zip: TEMPE, AZ 85281

Title: D ( ) Delete
Name: GILES, TERRY
Address: 80 EAST RIO SALADO PARKWAY STE. 610
City-St-Zip: TEMPE, AZ 85281

Title: D ( ) Delete
Name: NEIL, HICKSON
Address: 80 EAST RIO SALADO PARKWAY STE. 610
City-St-Zip: TEMPE, AZ 85281

Title: D ( ) Delete
Name: BELL, GREGORY
Address: 80 EAST RIO SALADO PARKWAY STE. 610
City-St-Zip: TEMPE, AZ 85281

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: COO (X) Change ( ) Addition
Name: WILLIAMS, JAMES
Address: 80 EAST RIO SALADO PARKWAY STE. 610
City-St-Zip: TEMPE, AZ 85281

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:

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: JAMES WILLIAMS COO 03/19/2009

Electronic Signature of Signing Officer or Director — Date