

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F09000005000

FILED  
Jan 03, 2012  
Secretary of State

**Entity Name:** EMERGENCY TWENTY FOUR, INC.

**Current Principal Place of Business:**

999 E. TOUHY AVENUE  
SUITE 500  
DES PLAINES, IL 60018

**New Principal Place of Business:**

**Current Mailing Address:**

999 E. TOUHY AVENUE  
SUITE 500  
DES PLAINES, IL 60018

**New Mailing Address:**

**FEI Number:** 36-2655365

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CT CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND RD  
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

**OFFICERS AND DIRECTORS:**

Title: PT  
Name: MONTEVERDE, DANTE  
Address: 207 WOODHAVEN LANE  
City-St-Zip: BARRINGTON HILLS, IL 60010

Title: VP  
Name: DEVEREAUX, PATRICK  
Address: 155 E HELM ROAD  
City-St-Zip: BARRINGTON HILLS, IL 60010

Title: S  
Name: LOPEZ MONTEVERDE, ALICIA  
Address: 207 WOODHAVEN LANE  
City-St-Zip: BARRINGTON HILLS, IL 60010

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

SIGNATURE: DANTE MONTEVERDE

PRES

01/03/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date