

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000051826

FILED
Apr 24, 2011
Secretary of State

Entity Name: EMERGENCY MEDICAL DEVICES, LLC

Current Principal Place of Business:

1875 TULIP LANE
WELLINGTON, FL 33414

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 367
LOXAHATCHEE, FL 33470

New Mailing Address:

FEI Number: 20-5475397

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MENTKOW, JACK
1875 TULIP LANE
WELLINGTON, FL 33414 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

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: MENTKOW, JACK
Address: 1875 TULIP LANE
City-St-Zip: WELLINGTON, FL 33414

Title: MGR
Name: MENTKOW, LISA
Address: 1875 TULIP LANE
City-St-Zip: WELLINGTON, FL 33414

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: JACK MENTKOW

MGR

04/24/2011

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date