

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000073986

FILED
May 01, 2010
Secretary of State

Entity Name: EMERGENCY MEDICAL EDUCATION, LLC

Current Principal Place of Business:

6785 COLUMBIA AVENUE
LAKE WORTH, FL 33467

New Principal Place of Business:

Current Mailing Address:

6785 COLUMBIA AVENUE
LAKE WORTH, FL 33467

New Mailing Address:

FEI Number: 84-1714045 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

KEELER, JENNIFER
6785 COLUMBIA AVENUE
LAKE WORTH, FL 33467 US

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: MR.
Name: KEELER, MATTHEW P
Address: 6785 COLUMBIA AVENUE
City-St-Zip: LAKE WORTH, FL 33467 US

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: MATTHEW KEELER

MR.

05/01/2010

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