

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000065398

FILED
Apr 29, 2009
Secretary of State

Entity Name: MEDEVAC - GRISWOLD, LLC

Current Principal Place of Business:

C/O E FRANK GRISWOLD III
424 DOWN PINE DRIVE
SEFFNER, FL 335843719 US

New Principal Place of Business:

E FRANK GRISWOLD III, CEO
424 DOWN PINE DRIVE
SEFFNER, FL 335843719 US

Current Mailing Address:

C/O E FRANK GRISWOLD III
424 DOWN PINE DRIVE
SEFFNER, FL 335843719 US

New Mailing Address:

FEI Number: 26-2925494 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GRISWOLD, E FRANK III
424 DOWN PINE DRIVE
SEFFNER, FL 335843719 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: MGRM () Delete
Name: GRISWOLD, E FRANK III
Address: 424 DOWN PINE DRIVE
City-St-Zip: SEFFNER, FL 335843719 US

Title: MGRM () Delete
Name: GRISWOLD, LISA A
Address: 424 DOWN PINE DRIVE
City-St-Zip: SEFFNER, FL 335843719 US

ADDITIONS/CHANGES:

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 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: /S/ E FRANK GRISWOLD III

MGR

04/29/2009

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