

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000109097

**FILED**  
**Jan 06, 2010**  
**Secretary of State**

**Entity Name:** EXPRESS MEDICAL TRANSPORT, LLC

**Current Principal Place of Business:**

611 DRUID RD E, STE 704  
CLEARWATER, FL 33756

**New Principal Place of Business:**

611 DRUID RD E, STE 201  
CLEARWATER, FL 33756

**Current Mailing Address:**

318 ROEBLING ROAD SOUTH  
BELLEAIR, FL 33756

**New Mailing Address:**

**FEI Number:** 26-3768578      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

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

BLAKE, JEANINE  
318 ROEBLING ROAD SOUTH  
BELLEAIR, FL 33756      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:** BLAKE, JEANINE  
**Address:** 318 ROEBLING ROAD SOUTH  
**City-St-Zip:** BELLEAIR, FL 33756 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: JEANINE BLAKE

MGR

01/06/2010

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