

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M03000001128

FILED  
Apr 28, 2005  
Secretary of State

Entity Name: THE AIR AMBULANCE GROUP, LLC

**Current Principal Place of Business:**

2424 N FEDERAL HIGHWAY, SUITE 101  
BOCA RATON, FL 33431

**New Principal Place of Business:**

**Current Mailing Address:**

2424 N FEDERAL HIGHWAY, SUITE 101  
BOCA RATON, FL 33431

**New Mailing Address:**

FEI Number: 59-3768137

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SCHNEIDER, JEFFREY  
1402 ROYAL PALM BEACH BLVD  
BLDG 700 SUITE 110  
ROYAL PALM BEACH, FL 33411 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/MEMBERS:**

Title: MGR ( ) Delete  
Name: BG CAPITAL GROUP SOU, TH FLORIDA, IN C .  
Address: 2424 N FEDERAL HIGHWAY, SUITE 101  
City-St-Zip: BOCA RATON, FL 33431

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGR ( ) Change (X) Addition  
Name: SCHNEIDER, JEFFREY A  
Address: 1402 ROYAL PALM BEACH BLVD  
City-St-Zip: ROYAL PALM BEACH, FL 33411

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JEFFREY SCHNEIDER

MGR

04/28/2005

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