## 2002 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# N04909

May 10, 2002 8:00 AM Secretary of State

Entity Name: MANAGERIAL ASSOCIATION OF EMERGENCY SERVICES, INC.

Current Principal Place of Business: New Principal Place of Business:

6001 MARINA DRIVE 5200 26TH STREET WEST BRADENTON BEACH, FL 34217 US BRADENTON, FL 34207 US

Current Mailing Address: New Mailing Address:

6001 MARINA DRIVE 5200 26TH STREET WEST BRADENTON BEACH, FL 34217 US BRADENTON, FL 34207 US

FEI Number: 59-2377594 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

POLLOCK, W. BRETT
6001 MARINA DRIVE
HOLMES BEACH, FL 34217
US
QUADERER, DAVID R
5200 26TH STREET WEST
BRADENTON, FL 34207
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: DAVID R. QUADERER 05/10/2002

Electronic Signature of Registered Agent Date

## OFFICERS AND DIRECTORS:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DST ( ) Delete Title: DST (X) Change ( ) Addition Name: POLLOCK, W. BRETT Name: QUADERER, DAVID R

Address: 6001 MARINA DRIVE Address: 5200 26TH STREET WEST
City-St-Zip: BRADENTON BEACH, FL 34217 City-St-Zip: BRADENTON, FL 34207

Title: D ( ) Delete Title: VD (X) Change ( ) Addition Name: AUCLAIR, MICHAEL Name: STULCE, RANDALL R

Address: 3001 NORTH PORT BLVD Address: 5200 26TH STREET WEST City-St-Zip: NORTH PORT, FL 34286 City-St-Zip: BRADENTON, FL 34207

 $\label{eq:title:pd} \mbox{Title:} \qquad \mbox{PD} \qquad \mbox{() Delete} \qquad \qquad \mbox{Title:} \qquad \mbox{D} \qquad \mbox{(X) Change () Addition}$ 

 Name:
 PRICE, KENNETH A
 Name:
 PRICE, KENNETH A

 Address:
 6001 MARINA DRIVE
 Address:
 6001 MARINA DRIVE

City-St-Zip: BRADENTON BEACH, FL 34217 City-St-Zip: BRADENTON BEACH, FL 34217

Title: VD ( ) Delete Title: PD (X) Change ( ) Addition

Name:CARDEN, PATRICK OName:CARDEN, PATRICK OAddress:5490 GULF OF MEXICO DRIVEAddress:5490 GULF OF MEXICO DRIVECity-St-Zip:LONGBOAT KEY, FL 34228City-St-Zip:LONGBOAT KEY, FL 34228

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 or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DAVID R. QUADERER DST 05/10/2002