

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N04909

FILED
Apr 30, 2003
Secretary of State

Entity Name: MANAGERIAL ASSOCIATION OF EMERGENCY SERVICES, INC.

Current Principal Place of Business:

5200 26TH STREET WEST
BRADENTON, FL 34207 US

New Principal Place of Business:

Current Mailing Address:

5200 26TH STREET WEST
BRADENTON, FL 34207 US

New Mailing Address:

FEI Number: 59-2377594

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

QUADERER, DAVID R
5200 26TH STREET WEST
BRADENTON, FL 34207 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

OFFICERS AND DIRECTORS:

Title: DST () Delete
Name: QUADERER, DAVID R
Address: 5200 26TH STREET WEST
City-St-Zip: BRADENTON, FL 34207

Title: VD () Delete
Name: STULCE, RANDALL R
Address: 5200 26TH STREET WEST
City-St-Zip: BRADENTON, FL 34207

Title: D () Delete
Name: PRICE, KENNETH A
Address: 6001 MARINA DRIVE
City-St-Zip: BRADENTON BEACH, FL 34217

Title: PD () Delete
Name: CARDEN, PATRICK O
Address: 5490 GULF OF MEXICO DRIVE
City-St-Zip: LONGBOAT KEY, FL 34228

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: P (X) Change () Addition
Name: STULCE, RANDALL R
Address: 5200 26TH STREET WEST
City-St-Zip: BRADENTON, FL 34207

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

Title: D (X) Change () Addition
Name: CARDEN, PATRICK O
Address: 5490 GULF OF MEXICO DRIVE
City-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

04/30/2003

Electronic Signature of Signing Officer or Director

Date