

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N21715

**FILED**  
**Feb 16, 2010**  
**Secretary of State**

**Entity Name:** DISTRICT I EMS COUNCIL, INC.

**Current Principal Place of Business:**

4211 JERRY L. MARYGARDEN ROAD  
PENSACOLA, FL 32504 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 11065  
PENSACOLA, FL 325241065 US

**New Mailing Address:**

PO BOX 11338  
PENSACOLA, FL 325241338 US

**FEI Number:** 59-2867764

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

SIMS, ROBERT  
3013 RAINES ST  
PENSACOLA, FL 32514 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: P  
Name: LANDRY, KIM MD  
Address: 4211 JERRY L. MAYGARDEN ROAD  
City-St-Zip: PENSACOLA, FL 32504

Title: VP  
Name: STANKOPE, KEVIN  
Address: P.O. BOX 17500  
City-St-Zip: PENSACOLA, FL 32501

Title: TD  
Name: SIMS, ROBERT B  
Address: 3013 RAINES ST  
City-St-Zip: PENSACOLA, FL 32514

Title: D  
Name: KOSTIC, PAT  
Address: 6575 NORTH W. ST  
City-St-Zip: PENSACOLA, FL 32505

Title: S  
Name: HOBBS, MARGIE  
Address: 8383 N. DAVIS HWY.  
City-St-Zip: PENSACOLA, FL 32514

I hereby 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 all other like empowered.

**SIGNATURE:** ROBERT B. SIMS

TD

02/16/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date