

**NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # N 9300000 2878

1. Entity Name

ANGEL FLIGHT OF SOUTH FLORIDA INC.

DEPT. OF STATE
DIVISION OF CORPORATION

02 FEB 25 PM 5:08

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21521 Woodchuck Ct

3. Mailing Address

c/o W.J. Tremblay, P.A.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

1801 S. Federal Hwy, Ste 219

City & State

Boca Raton

City & State

Delray Beach

Zip

33428

Country

Zip

33483

Country

DO NOT WRITE IN THIS SPACE

02-18-02 90096 001 \$61.25

4. FEI Number

65-0423940

Applied For

Not Applicable

5. Certificate of Status Desired

X

\$8.75 Additional Fee Required

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7. Name and Address of Current Registered Agent

Name

W.J. TREMBLAY, P.A.

Street Address (P.O. Box Number is Not Acceptable)

1801 S. FEDERAL HWY. STE 219

City

DELRAY BEACH

FL

Zip Code

33483

8. 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

W.J. TREMBLAY, P.A.

W.J. Tremblay

02/18/02

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when registering)

DATE

FEE IS \$61.25
Initial or Amended UBR

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
ROBERT TAYLOR, PSTD
21521 WOODCHUCK CT.
BOCA RATON, FL. 33428

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D.
SUSAN M. BUMP
342 SOUTHWIND DR #216
NORTH PALM BEACH, FL. 33408

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D.
HENRY WHITEHILL
10885 GRANDE BLVD.
WEST PALM BEACH, FL. 33412

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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1/2/25

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or on an attachment with an address with or other like empowered.

SIGNATURE:

[Signature]

02/18/02 483-4535

CR2E037B (12/01)