


**2008-FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Feb 25, 2008 8:00 A.M.
Secretary of State**

DOCUMENT # P05000117352 1. Entity Name JARVIS EMERGENCY SERVICES, INC.	
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Principal Place of Business 2436 U.S. HIGHWAY #1 VERO BEACH, FL 32960 US	Mailing Address 2436 U.S. HIGHWAY #1 VERO BEACH, FL 32960 US
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DO NOT WRITE IN THIS SPACE



01312008 No Chg-P CR2E034 (11/05)

4. FEI Number 20-3361386	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent SMITH, CHRISTOPHER 590 EAST FORREST TRAIL VERO BEACH, FL 32962

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IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P JARVIS, WILLIAM 49557 COMPASS POINT CHESTERFIELD, MI 48047
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP SMITH, CHRISTOPHER 590 EAST FORREST TRAIL VERO BEACH, FL 32962
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with another like empowered.

SIGNATURE: William Jarvis **WILLIAM JARVIS** 2/19/08 (586) 634-8638
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #