

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000119365

FILED  
Jan 31, 2006  
Secretary of State

Entity Name: EMERGENCY MOTORCYCLE TRANSPORT, INCORPORATED

## Current Principal Place of Business:

821 NOCTURNE DRIVE  
CHULUOTA, FL 32766

## New Principal Place of Business:

## Current Mailing Address:

821 NOCTURNE DRIVE  
CHULUOTA, FL 32766

## New Mailing Address:

P.O. BOX 621416  
OVIEDO, FL 32762

FEI Number: 20-3491216

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FARMER, NANCY M  
821 NOCTURNE DRIVE  
CHULUOTA, FL 32766 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: FARMER, NANCY M  
Address: 821 NOCTURNE DRIVE  
City-St-Zip: CHULUOTA, FL 32766

Title: VP ( ) Delete  
Name: NICHOLSON, SCOTT W  
Address: 821 NOCTURNE DRIVE  
City-St-Zip: CHULUOTA, FL 32766

Title: T ( ) Delete  
Name: TRUBENBACH, EDWARD  
Address: 4650 PARKER COURT  
City-St-Zip: OVIEDO, FL 32765

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/T (X) Change ( ) Addition  
Name: FARMER, NANCY M  
Address: 821 NOCTURNE DRIVE  
City-St-Zip: CHULUOTA, FL 32766

Title: V/DO (X) Change ( ) Addition  
Name: NICHOLSON, SCOTT W  
Address: 821 NOCTURNE DRIVE  
City-St-Zip: CHULUOTA, FL 32766

Title: AV/M (X) Change ( ) Addition  
Name: AHO, GEORGE A  
Address: 1007 MALCOLM COURT  
City-St-Zip: OVIEDO, FL 32765

Title: S/DM ( ) Change (X) Addition  
Name: AHO, CYNTHIA L  
Address: 1007 MALCOLM COURT  
City-St-Zip: OVIEDO, FL 32765

Title: CGM ( ) Change (X) Addition  
Name: LILLIE, ROBERT A  
Address: 1811 CHIPPEWA TRAIL  
City-St-Zip: MAITLAND, FL 32751

Title: SCR ( ) Change (X) Addition  
Name: TRUBENBACH, EDWARD  
Address: 4650 PARKER COURT  
City-St-Zip: OVIEDO, FL 32765

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: NANCY M. FARMER

P/T

01/31/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date