

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000043323

FILED  
Jan 16, 2009  
Secretary of State

Entity Name: EMERGENCY DEPARTMENT PASS INC.

## Current Principal Place of Business:

1324 LAKELAND HILLS BLVD  
LAKELAND, FL 338054500

## New Principal Place of Business:

## Current Mailing Address:

1324 LAKELAND HILLS BLVD  
LAKELAND, FL 338054500

## New Mailing Address:

FEI Number: 61-1560981

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

A1A REGISTERED AGENT, INC.  
5647 110TH AVE NORTH  
ROYAL PALM BEACH, FL 33411 US

## Name and Address of New Registered Agent:

HARTSFIELD, LISA C  
1324 LAKELAND HILLS BLVD  
LAKELAND, FL 338054500 US

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: LISA HARTSFIELD

01/16/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: HARTSFIELD, LISA  
Address: 1324 LAKELAND HILLS BLVD  
City-St-Zip: LAKELAND, FL 338054500

Title: ST ( ) Delete  
Name: MARTINEZ, ORFA  
Address: 1324 LAKELAND HILLS BLVD  
City-St-Zip: LAKELAND, FL 338054500

Title: D ( ) Delete  
Name: ROCKHILL, BABS  
Address: 1324 LAKELAND HILLS BLVD  
City-St-Zip: LAKELAND, FL 338054500

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

I hereby certify that the information supplied with this filing does not qualify 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: LISA HARTSFIELD

P

01/16/2009

Electronic Signature of Signing Officer or Director

Date