

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000041070

FILED
Mar 07, 2012
Secretary of State

Entity Name: SOUTH FLORIDA AIR AMBULANCE INC.

Current Principal Place of Business:

6030 SHADY OAKS LANE
NAPLES, FL 34119

New Principal Place of Business:

Current Mailing Address:

6030 SHADY OAKS LANE
NAPLES, FL 34119

New Mailing Address:

FEI Number: 45-2250996

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CARROLL, MARK P
6030 SHADY OAKS LANE
NAPLES, FL 34119 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, T
Name: CARROLL, MARK P
Address: 6030 SHADY OAKS LANE
City-St-Zip: NAPLES, FL 34119 US

Title: D
Name: CARROLL, MARK P
Address: 6030 SHADY OAKS LANE
City-St-Zip: NAPLES, FL 34119 US

Title: S
Name: CARROLL, FRANCINE
Address: 6030 SHADY OAKS LANE
City-St-Zip: NAPLES, FL 34119 US

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MARK P. CARROLL

PRES

03/07/2012

Electronic Signature of Signing Officer or Director

Date