

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000088517

1. Entity Name

EMERGENCY MEDICAL SERVICES GROUP, INC.

FILED

Mar 05, 2001 8:00 am
Secretary of State

03-05-2001 90316 008 ***158.75

Principal Place of Business

728 MONTE CRISTO BLVD
TIERRA VERDE FL 33715

Mailing Address

728 MONTE CRISTO BLVD
TIERRA VERDE FL 33715

2. Principal Place of Business

12490 Ulmerton Road

3. Mailing Address

12490 Ulmerton Road

Suite, Apt. #, etc.

Room 134

Suite, Apt. #, etc.

Room 134

City & State

Largo, FL

City & State

Largo, FL

Zip

33774

Country

USA

Zip

33774

Country

USA



DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3345193

Applied For

Not Applicable

5. Certificate of Status Desired

☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BARNARD, JEFFREY R
728 MONTE CRISTO BLVD
TIERRA VERDE FL 33715

Name

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

City

FL

Zip Code

7. Name and Address of New Registered Agent

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE PTD
NAME BARNARD, JEFFREY R
STREET ADDRESS 728 MONTE CRISTO BLVD
CITY-ST-ZIP TIERRA VERDE FL ☐ Delete

TITLE VSD
NAME PETTYJOHN, ROBERT B
STREET ADDRESS 594 RANCH RD
CITY-ST-ZIP TARPON SPRINGS FL ☐ Delete

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jeff R. Barnard
President/Exec Dir

03-01-01

Date

227-582-2036

Daytime Phone #

CR2E034 (10/00)