

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

Feb 18 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P95000091515 (3)

1. Corporation Name

EMSA CORRECTIONAL CARE, INC.

Principal Place of Business

1200 SOUTH PINE ISLAND ROAD  
SUITE 600  
PLANTATION FL 33324

Mailing Address

1200 SOUTH PINE ISLAND ROAD  
SUITE 600  
PLANTATION FL 33324-4480

3. Date Incorporated or Qualified  
12/01/1995

3a. Date of Last Report  
04/05/1996

4. FEI Number  
65-0290601

Applied For  
Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐ \$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
SUITE 250  
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE V  
NAME CASTILLE, ROBERT  
STREET ADDRESS 1200 S. PINE ISLAND RD., SUITE 600  
CITY-ST-ZIP PLANTATION FL ☐ DELETE

TITLE PD  
NAME FINDEISS, J. CLIFFORD M.D.  
STREET ADDRESS 1200 SOUTH PINE ISLAND RD., SUITE 600  
CITY-ST-ZIP PLANTATION FL ☐ DELETE

TITLE VD  
NAME MCCLEARY, GREGORY W JR.  
STREET ADDRESS 1200 SOUTH PINE ISLAND RD., SUITE 600  
CITY-ST-ZIP PLANTATION FL ☐ DELETE

TITLE V  
NAME PRADO, MARTA  
STREET ADDRESS 1200 S. PINE ISLAND RD., SUITE 600  
CITY-ST-ZIP PLANTATION FL ☐ DELETE

TITLE VT  
NAME BLANFORD, MARY ANN  
STREET ADDRESS 1200 S. PINE ISLAND RD., SUITE 600  
CITY-ST-ZIP PLANTATION FL ☐ DELETE

TITLE S  
NAME WARLEN, NEESA  
STREET ADDRESS 1200 S. PINE ISLAND RD., SUITE 600  
CITY-ST-ZIP PLANTATION FL ☒ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☒ Addition  
6.2 NAME S  
6.3 STREET ADDRESS Peck, David C.  
6.4 CITY-ST-ZIP 1200 S. Pine Island Rd., Suite 600  
Plantation, FL

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Mary Ann Blanford  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/29/97

(954) 475-1300

Date Daytime Phone #

CR2E034 (9/96)