2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000002320

Entity Name: MED EVAC, INC.

FILED Apr 26, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

406 NORTH REO STREET. SUITE 137 406 NORTH REO STREET TAMPA, FL 33609

SUITE # 137 TAMPA, FL 33609

GRISWOLD III, E

FRANK

New Mailing Address:

Current Mailing Address: POST OFFICE BOX 2079 MANGO, FL 335502079 US

in the State of Florida.

FEI Number: 59-3357299 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

GRISWOLD, III., E. **FRANK** C/O KURPIERS <> HARLAND, P.A., ATTORNEYS 696 - 1ST AVENUE SOUTH, SUITE 304

C/O KURPIERS LAW FIRM 707 NORTH FLORIDA AVENUE, SIXTH FLOOR TAMPA, FL US SAINT PETERSBURG, FL 33701 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both,

SIGNATURE: E FRANK GRISWOLD III 04/26/2007

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition () Delete

GRISWOLD, III., E. FRANK Name: Name: POST OFFICE BOX 2079 Address: Address: City-St-Zip: MANGO, FL 335502079 US City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutés. 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: E FRANK GRISWOLD III 04/26/2007 S