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Feb 10 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # V73503

(7)

1. Corporation Name

REDMEDICAL ALERT, INC.

Principal Place of Business

1701 W. HILLSBORO BLVD., SUITE 305
DEERFIELD BEACH FL 33442

Mailing Address

DEPT. 924.13
10400 FRENWOOD ROAD
BETHESDA MD 20817



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/22/1992

4. FEI Number

65-0364728

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 owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 10400 Fernwood Road

Suite, Apt. #, etc.

22 Dept. 924.13

City & State

23 Bethesda MD

Zip

Country

24 20817

25

2a. Mailing Address

26 10400 Fernwood Road

Suite, Apt. #, etc.

27 Dept 924.13

City & State

28 Bethesda, MD

Zip

Country

29 20817

30

9. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301

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 the corporation

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

P
JOHNSON, PAUL E JR
MARRIOTT DR, DEPT 92413
WASHINGTON DC

TITLE ☐ DELETE

VP
SHAW, WILLIAM J
MARRIOTT DR, DEPT 92413
WASHINGTON DC

TITLE ☐ DELETE

T
MORROW, TERENCE P
MARRIOTT DR, DEPT 92413
WASHINGTON DC

TITLE ☐ DELETE

S
MCGLOCKTON, JOAN R
MARRIOTT DR, DEPT 92413
WASHINGTON DC

TITLE ☐ DELETE

AS
BENZ, NANCY L
MARRIOTT DR, DEPT 92413
WASHINGTON DC

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

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

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

VP
Ryan, Joseph
Marriott Dr, Dept. 924.13
Washington DC 20058

14. 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 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:

Nancy L. Benz

2/2/98

CR2E034 (10/97)