2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 16, 2017
Secretary of State
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Entity Name: FLORIDA ASSOCIATION OF COUNTY EMERGENCY MEDICAL SERVICE, INCORPORATED

Current Principal Place of Business:

2728 OAKDALE DR. W,
ORANGE PARK, FL 32073

Current Mailing Address:

PO BOX 1490
ORANGE PARK, FL 32067 US

FEI Number: 59-2747652

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MORELAND, CHARLES E
2728 OAKDALE DR. W,
ORANGE PARK, FL 32073 US

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

Officer/Director Detail :

Title	TD	Title	PD
Name	THEUS, HAROLD	Name	MORELAND, CHARLES E
Address	911 SE FIFTH ST	Address	2728 OAKDALE DR. W,
City-State-Zip:	GAINESVILLE FL 32801	City-State-Zip:	ORANGE PARK FL 32073
Title	VP	Title	PROGRAM ADMINISTRATOR
Name	PARRISH, ALLEN	Name	HEATHERINGTON, MARCIE
Address	945-C NORTH TEMPLE AVE	Address	2728 OAKDALE DR. W,
City-State-Zip:	STARKE FL 32091	City-State-Zip:	ORANGE PARK FL 32073

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

SIGNATURE: MARCIE HEATHERINGTON PROGRAM ADMINISTRATOR 01/16/2017

Electronic Signature of Signing Officer/Director Detail — Date