

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000007930

Entity Name: VITAL FLIGHT, INC.**Current Principal Place of Business:**650 SW 34TH ST
SUITE 301
FORT LAUDERDALE, FL 33315**Current Mailing Address:**P.O. BOX 1767
POMPANO BEACH, FL 33061**FEI Number:** 27-3302681**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**POWERS, THOMAS
650 SW 34TH ST
SUITE 301
FORT LAUDERDALE, FL 33315 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	CHAIRMAN
Name	KNIES, DAVID M
Address	2406 AUTUMN RIDGE DRIVE SW
City-State-Zip:	HUNTSVILLE AL 35803

Title	TREASURER
Name	BROMBERG, BRUCE H
Address	3080 SE CHANDELLE
City-State-Zip:	JUPITER FL 33478

Title	SECRETARY
Name	COVIELLO, MICHAEL
Address	3810 NE 26TH STREET
City-State-Zip:	LIGHTHOUSE POINT FL 33064

Title	DIRECTOR
Name	STEINER, JONATHAN
Address	6317-C GRAYCLIFF DRIVE
City-State-Zip:	BOCA RATON FL 33496

Title	DIRECTOR
Name	RODRIGUEZ, HENRIQUE
Address	1499 CAMELLIA DRIVE
City-State-Zip:	WESTON FL 33326

Title	DIRECTOR
Name	PETRUCCO, JOHN
Address	1453 E BEXLEY PARK DR
City-State-Zip:	DELRAY BEACH FL 33445

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: DAVID M KNIES

CHAIRMAN

05/01/2015

Electronic Signature of Signing Officer/Director Detail_____
Date