2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 22, 2015
Secretary of State
CC6474731729

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Entity Name: DISASTER MEDICAL RESPONSE SYSTEMS, INC.

Current Principal Place of Business:

7947 113TH AVE CIR E
PARRISH, FL 34219

Current Mailing Address:

7947 113TH AVE CIR E
PARRISH, FL 34219

FEI Number: 46-2618315

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SCHULER, DANIEL M
7947 113TH AVE CIR E
PARRISH, FL 34219 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	P	Title	D
Name	SCHULER, DANIEL M	Name	PIERCE, JOSH
Address	7947 113TH AVE CIR E	Address	7947 113TH AVE CIR E
City-State-Zip:	PARRISH FL 34219	City-State-Zip:	PARRISH FL 34219

Title	T
Name	ALEXANDER, LARA
Address	7947 113TH AVE CIR E
City-State-Zip:	PARRISH FL 34219

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: DANIEL SCHULER PRESIDENT 04/22/2015

Electronic Signature of Signing Officer/Director Detail — Date