

**2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F20454

**Entity Name:** CENTURY AMBULANCE SERVICE, INC.

**Current Principal Place of Business:**

2110 HERSCHEL STREET  
JACKSONVILLE, FL 32204

**Current Mailing Address:**

720 PORTAL STREET  
COTATI, CA 94931 US

**FEI Number:** 59-2060042

**Certificate of Status Desired:** Yes

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

GILLESPIE, RICK CPA  
2110 HERSCHEL STREET  
JACKSONVILLE, FL 32204 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:** RICK GILLESPIE

02/09/2021

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title GENERAL MANAGER  
Name JOHNSON, MATT  
Address 2110 HERSCHEL STREET  
City-State-Zip: JACKSONVILLE FL 32204

Title CORPORATE CONTROLLER  
Name GILLESPIE, RICK  
Address 720 PORTAL STREET  
City-State-Zip: COTATI CA 94931

Title CEO  
Name HARDAWAY, BROCK  
Address 720 PORTAL STREET  
City-State-Zip: COTATI CA 94931

Title CHIEF COMPLIANCE OFFICER  
Name LOYA, KATHY  
Address 720 PORTAL STREET  
City-State-Zip: COTATI CA 94931

Title CFO  
Name MEISER, JUSTIN  
Address 720 PORTAL STREET  
City-State-Zip: COTATI CA 94931

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

**SIGNATURE:** RICK GILLESPIE, CPA

**CORPORATE  
CONTROLLER**

02/09/2021

Electronic Signature of Signing Officer/Director Detail

Date