

2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G42895

Entity Name: REV AMBULANCE GROUP ORLANDO, INC.

Current Principal Place of Business:

2737 N FORSYTH RD
WINTER PARK, FL 32792

Current Mailing Address:

2737 N FORSYTH RD
WINTER PARK, FL 32792 US

FEI Number: 59-2309315

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S PINE ISLAND RD
PLANTATION, FL 33324 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 CEO
Name SKONIECZNY, MARK A
Address 245 SOUTH EXECUTIVE DRIVE
SUITE 100
City-State-Zip: BROOKFIELD WI 53005

Title CHIEF ACCOUNTING OFFICER
Name LADUE, JOSEPH F
Address 245 SOUTH EXECUTIVE DRIVE
SUITE 100
City-State-Zip: BROOKFIELD WI 53005

Title VP, TREASURER
Name GUSTAFSON, NICOLE A
Address 245 SOUTH EXECUTIVE DRIVE
SUITE 100
City-State-Zip: BROOKFIELD WI 53005

Title DIRECTOR
Name SKONIECZNY, MARK A.
Address 245 SOUTH EXECUTIVE DRIVE
SUITE 100
City-State-Zip: BROOKFIELD WI 53005

Title DIRECTOR
Name LADUE, JOSEPH F.
Address 245 SOUTH EXECUTIVE DRIVE
SUITE 100
City-State-Zip: BROOKFIELD WI 53005

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: MARK A. SKONIECZNY

CEO/DIRECTOR

04/23/2024

Electronic Signature of Signing Officer/Director Detail

Date