2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 17, 2014
Secretary of State
CC2921152607

DOCUMENT# P96000009927

Entity Name: ADVANCED PATIENT TRANSPORTATION, INC.

Current Principal Place of Business:

1 SHIRCLIFF WAY
JACKSONVILLE, FL 32204

Current Mailing Address:

2 SHIRCLIFF WAY
SUITE 600
JACKSONVILLE, FL 32204

FEI Number: 59-3381444

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MIDDLEBROOKS, J. HUGH
2 SHIRCLIFF WAY
SUITE 600
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: J. HUGH MIDDLEBROOKS 04/17/2014

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	DCP	Title	DVC
Name	CHISHOLM, MOODY	Name	ROMINE, DONNIE
Address	1 SHIRCLIFF WAY	Address	2 SHIRCLIFF WAY SUITE 935
City-State-Zip:	JACKSONVILLE FL 32204	City-State-Zip:	JACKSONVILLE FL 32204

Title	DST
Name	HODGKINSON, KIM
Address	1 SHIRCLIFF WAY
City-State-Zip:	JACKSONVILLE FL 32204

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: MOODY CHISHOLM DCP 04/17/2014

Electronic Signature of Signing Officer/Director Detail — Date