

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000107906

Entity Name: EMERGE MONITORING, INC.

FILED
Mar 24, 2011
Secretary of State

Current Principal Place of Business:

11101 ROOSEVELT BLVD N
ST PETERSBURG, FL 33716 US

New Principal Place of Business:

Current Mailing Address:

11101 ROOSEVELT BLVD N
ST PETERSBURG, FL 33716 US

New Mailing Address:

FEI Number: 26-3806208

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEMS
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: DP
Name: KESNECK, BRIAN J
Address: 11101 ROOSEVELT BLVD N
City-St-Zip: ST PETERSBURG, FL 33716 US

Title: DT
Name: MARTZ, B BRADFORD
Address: 11101 ROOSEVELT BLVD N
City-St-Zip: ST PETERSBURG, FL 33716 US

Title: D
Name: MEEHAN, DAVID K
Address: 11101 ROOSEVELT BLVD N
City-St-Zip: ST PETERSBURG, FL 33716 US

Title: VPS
Name: SOUTHEY, ROBERT G
Address: 11101 ROOSEVELT BLVD N
City-St-Zip: ST PETERSBURG, FL 33716 US

Title: EVP
Name: CASSELL, DEREK L
Address: 11101 ROOSEVELT BLVD N
City-St-Zip: ST PETERSBURG, FL 33716 US

Title: VP
Name: WHALEN, MICHAEL J
Address: 11101 ROOSEVELT BLVD N
City-St-Zip: ST PETERSBURG, FL 33716 US

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: B BRADFORD MARTZ

DT

03/24/2011

Electronic Signature of Signing Officer or Director

_____ Date