

No. <b>C 165910</b>		<b>Due no later than Mar 31, 2015</b>		<b>2. Registered Agent and Address (NO PO BOX)</b>			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>Annual Report Form</b>  <b>1. Mailing Address: Correct in this box if needed.</b>  MUNICIPAL EMERGENCY SERVICES, INC. ELLEN CAVANAUGH 7 POVERTY ROAD 85H BENNETT SQUARE SOUTHURY CT 06488		NATIONAL REGISTERED AGENTS INC 921 S ORCHARD ST STE G BOISE 83705			
				3. <u>New</u> Registered Agent Signature:*			
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
PRESIDENT	THOMAS X HUBREGSEN	7 POVERTY ROAD 85H BENNETT SQUARE	SOUTHURY	CT	USA	06488	
DIRECTOR	MICHAEL F BONNET	420 LEXINGTON AVENUE 24TH FLOOR ROOM 2446-7	NEW YORK	NY	USA	10017	
DIRECTOR	ANDREW HUBREGSEN	420 LEXINGTON AVENUE 24TH FLOOR ROOM 2446-7	NEW YORK	NY	USA	10017	
DIRECTOR	JOHN MCNULTY	7 POVERTY ROAD 85H BENNETT SQUARE	SOUTHURY	CT	USA	06488	
5. Organized Under the Laws of:  <b>NV C 165910</b>		6. Annual Report must be signed.* Signature: Thomas Hubregsen Name (type or print): Thomas Hubregsen  Date: 03/04/2015 Title: President					
Processed 03/04/2015		* Electronically provided signatures are accepted as original signatures.					