

1.) CORPORATION NAME:

**MEDICAL TRANSPORTATION MANAGEMENT, INC.**

DUE DATE: **11/30/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CT CORPORATION SYSTEM  
4701 COX RD STE 301  
GLEN ALLEN, VA**

SCC ID NO: **F1419656**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMAV	5,000
COMBNV	45,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**HENRICO COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:

**MO**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 16 HAWK RIDGE DRIVE

CITY/ST/ZIP: LAKE ST LOUIS, MO 63367

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME:	ALAINA MACIA	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	P/CEO		
ADDRESS:	16 HAWK RIDGE DRIVE		
CITY/ST/ZIP/CO:	LAKE ST LOUIS, MO 63367		
NAME:	LYNN GRISWOLD	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	EXEC VP		
ADDRESS:	16 HAWK RIDGE DRIVE		
CITY/ST/ZIP/CO:	LAKE ST LOUIS, MO 63367		
NAME:	NATASHA BOEKHOLT	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	16 HAWK RIDGE DRIVE		
CITY/ST/ZIP/CO:	LAKE ST LOUIS, MO 63367		
NAME:	AARON CROWELL	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	16 HAWK RIDGE DRIVE		
CITY/ST/ZIP/CO:	LAKE ST. LOUIS, MO 63367		
NAME:	MICHELE LUCAS	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	16 HAWK RIDGE DRIVE		
CITY/ST/ZIP/CO:	LAKE ST LOUIS, MO 63367		
NAME:	PATRICK MCNIFF	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	16 HAWK RIDGE DRIVE		
CITY/ST/ZIP/CO:	LAKE ST LOUIS, MO 63367		

NAME:	DONALD C TIEMEYER	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	EXEC VP/GC/S		
ADDRESS:	16 HAWK RIDGE DRIVE		
CITY/ST/ZIP/CO:	LAKE ST. LOUIS, MO 63367		
NAME:	GARY RICHARDSON	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	CFO		
ADDRESS:	16 HAWK RIDGE DRIVE		
CITY/ST/ZIP/CO:	LAKE ST LOUIS, MO 63367		
NAME:	PEGGY A GRISWOLD	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	COB OF DIRECTRS		
ADDRESS:	16 HAWK RIDGE DRIVE		
CITY/ST/ZIP/CO:	LAKE ST LOUIS, MO 63367		
NAME:	J B BOWERS	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	10222 EAST SOUTHWIND LANE		
CITY/ST/ZIP/CO:	#1006 SCOTTSDALE, AZ 85262		
NAME:	Joseph Federer	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	CIO		
ADDRESS:	16 Hawk Ridge Dr		
CITY/ST/ZIP/CO:	Lake St Louis, MO 63367		
NAME:	Randall Baum	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	16 Hawk Ridge Drive		
CITY/ST/ZIP/CO:	Lake St Louis, MO 63367		
NAME:	Kerri Schewe	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	16 Hawk Ridge Drive		
CITY/ST/ZIP/CO:	Lake St Louis, MO 63367		
NAME:	Marian Qualls	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	16 Hawk Ridge Drive		
CITY/ST/ZIP/CO:	Lake St Louis, MO 63367		
NAME:	Kimberly Clark	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	608 Lamont St NW		
CITY/ST/ZIP/CO:	Washington, DC 20010		
NAME:	Justin Pare	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	3 Brentwood Road		
CITY/ST/ZIP/CO:	Windham, NH 03087		
NAME:	Philip Stalboerger	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	1443 Wellington Way		
CITY/ST/ZIP/CO:	Eagan, MN 55122		

I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

/s/ DONALD C TIEMEYER	DONALD C TIEMEYER, EXEC	10/8/2013
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	VP/GC/S PRINTED NAME AND CORPORATE TITLE	DATE

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.