2024 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N04000002700

Entity Name: THE PHYSICIANS FOUNDATION, INC.

FILED Apr 17, 2024 **Secretary of State** 9922822341CC

Current Principal Place of Business:

TEXAS MEDICAL ASSOCIATION 401 W 15TH ST 100 AUSTIN, TX 78701

Current Mailing Address:

TEXAS MEDICAL ASSOCIATION 401 W 15TH ST 100 AUSTIN, TX 78701 US

FEI Number: 20-0914085 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

UNITED STATES CORPORATION AGENTS, INC. 476 RIVERSIDE AVE. JACKSONVILLE, FL 32202 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 **PRESIDENT** Title **SECRETARY** Name PRICE, GARY MD Name DOWNS, LARRY Address 39 MIDDLE BEACH RD Address 2 PRINCESS ROAD

LAWRENCEVILLE NJ 08648 City-State-Zip: MADISON CT 06443 City-State-Zip:

VΡ Title **TREASURER** Title ALI, SUBHI Name BRAUD, LAWRENCE MD Name 806 E MAIN ST Address Address 4632 WESTDALE DR. City-State-Zip: WAVERLY TN 37185

City-State-Zip: BATON ROUGE LA 70808

Title CFO Title COO

Name SELIGSON, ROBERT Name DORMAN, JOHN E Address 4033 LILA BLUE LN % TEXAS MEDICAL ASSOCIATION Address 401 W. 15TH ST, STE 100 City-State-Zip: RALEIGH NC 27612

City-State-Zip: AUSTIN TX 78701

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JOHN DORMAN COO