2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 10, 2024
Secretary of State
4490953641CC

DOCUMENT# N04000002700

Entity Name: THE PHYSICIANS FOUNDATION, INC.

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: Yes

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
Name	PRICE, GARY MD
Address	39 MIDDLE BEACH RD
City-State-Zip:	MADISON CT 06443

Title	SECRETARY
Name	DOWNS, LARRY
Address	132 WESTPARK BLVD
City-State-Zip:	COLUMBIA SC 29210

Title	VP
Name	BRAUD, LAWRENCE MD
Address	132 WESTPARK BLVD
City-State-Zip:	COLUMBIA SC 29210

Title	TREASURER
Name	ALI, SUBHI
Address	806 E MAIN ST
City-State-Zip:	WAVERLY TN 37185

Title	COO
Name	DORMAN, JOHN E
Address	% TEXAS MEDICAL ASSOCIATION 401 W. 15TH ST, STE 100
City-State-Zip:	AUSTIN TX 78701

Title	CEO
Name	SELIGSON, ROBERT
Address	4033 LILA BLUE LN
City-State-Zip:	RALEIGH NC 27612

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 01/10/2024

Electronic Signature of Signing Officer/Director Detail — Date