

2014 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000007007

FILED
Feb 12, 2014
Secretary of State
CC1154273795

Entity Name: M. D. ANDERSON PHYSICIANS NETWORK CORPORATION

Current Principal Place of Business:

7007 BERTNER AVENUE
LEVEL 10 SOUTH, 10.3212
HOUSTON, TX 77030

Current Mailing Address:

7007 BERTNER AVENUE
LEVEL 10 SOUTH, 10.3212
HOUSTON, TX 77030 US

FEI Number: 76-0449960

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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 C
Name MURPHY, JR., WILLIAM A. DR.
Address 1515 HOLCOMBE BLVD, UNIT 57
FCT15.6006
City-State-Zip: HOUSTON TX 77030

Title VC
Name SKIBBER, JOHN DR.
Address 1515 HOLCOMBE BLVD., UNIT 444
FCT17.6032
City-State-Zip: HOUSTON TX 77030

Title VP
Name GILCHRIST, LAURA V
Address 7007 BERTNER AVENUE
LEVEL 10 SOUTH, 10.3212
City-State-Zip: HOUSTON TX 77030

Title PCEO
Name HYSLOP, WILLIAM A
Address 7007 BERTNER AVENUE
LEVEL 10 SOUTH, 10.3212
City-State-Zip: HOUSTON TX 77030

Title VP
Name SIMEONE, WILLIAM J.
Address 7007 BERTNER AVENUE
LEVEL 10 SOUTH, 10.3212
City-State-Zip: HOUSTON TX 77030

Title DIRECTOR
Name BUCHHOLZ, THOMAS DR.
Address 1515 HOLCOMBE BLVD., UNIT 97
B2.4583
City-State-Zip: HOUSTON TX 77030

Title DIRECTOR
Name MCENERY, KEVIN DR.
Address 1515 HOLCOMBE BLVD., UNIT 57
FCT16.6030
City-State-Zip: HOUSTON TX 77030

Title DIRECTOR
Name MIDDLETON, LAVINIA DR.
Address 1515 HOLCOMBE BLVD., UNIT 444
G1.3569B
City-State-Zip: HOUSTON TX 77030

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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: WILLIAM A. HYSLOP

PRESIDENT AND CEO

02/12/2014

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name PISTERS, PETER DR.
Address 1515 HOLCOMBE BLVD.
FCT18.6026
City-State-Zip: HOUSTON TX 77030

Title DIRECTOR
Name WAGUESPACK, STEVEN DR.
Address 1515 HOLCOMBE BLVD.
FCT12.5030
City-State-Zip: HOUSTON TX 77030

Title AVP
Name KUO, EMILY
Address 7007 BERTNER AVENUE
LEVEL 10 SOUTH, 10.3212
City-State-Zip: HOUSTON TX 77030

Title DIRECTOR
Name ENG, CATHY DR.
Address 1515 HOLCOMBE BLVD., UNIT 0426
FC10.3020
City-State-Zip: HOUSTON TX 77030

Title SECRETARY
Name VALERO, VICENTE DR.
Address 1515 HOLCOMBE BLVD., UNIT 1354
CPB5.3458
City-State-Zip: HOUSTON TX 77030

Title VP
Name WONG, MELANIE
Address 7007 BERTNER AVENUE
LEVEL 10 SOUTH, 10.3212
City-State-Zip: HOUSTON TX 77030

Title AVP
Name KELLER, LARRY
Address 7007 BERTNER AVENUE
LEVEL 10 SOUTH, 10.3212
City-State-Zip: HOUSTON TX 77030

Title VP
Name BERGEN, KIMBERLY S
Address 7007 BERTNER AVENUE
LEVEL 10 SOUTH, 10.3212
City-State-Zip: HOUSTON TX 77030