

2016 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

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FILED
Apr 29, 2016
Secretary of State
CC3152635280

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: No

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	Title	VC
Name	MURPHY, JR., WILLIAM A. DR.	Name	SKIBBER, JOHN DR.
Address	1515 HOLCOMBE BLVD, UNIT 57 FCT15.6006	Address	1515 HOLCOMBE BLVD., UNIT 444 FCT17.6032
City-State-Zip:	HOUSTON TX 77030	City-State-Zip:	HOUSTON TX 77030
Title	VP	Title	PCEO
Name	GILCHRIST, LAURA V	Name	HYSLOP, WILLIAM A
Address	7007 BERTNER AVENUE LEVEL 10 SOUTH, 10.3212	Address	7007 BERTNER AVENUE LEVEL 10 SOUTH, 10.3212
City-State-Zip:	HOUSTON TX 77030	City-State-Zip:	HOUSTON TX 77030
Title	VP	Title	DIRECTOR
Name	SIMEONE, WILLIAM J.	Name	MCENERY, KEVIN DR.
Address	7007 BERTNER AVENUE LEVEL 10 SOUTH, 10.3212	Address	1515 HOLCOMBE BLVD., UNIT 57 FCT16.6030
City-State-Zip:	HOUSTON TX 77030	City-State-Zip:	HOUSTON TX 77030
Title	SECRETARY	Title	DIRECTOR
Name	MIDDLETON, LAVINIA DR.	Name	HAWK, ERNEST DR.
Address	1515 HOLCOMBE BLVD., UNIT 444 G1.3569B	Address	1515 HOLCOMBE BLVD., UNIT 1354 CPB8.3088
City-State-Zip:	HOUSTON TX 77030	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

04/29/2016

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name LEVENBACK, CHARLES DR.
Address 1515 HOLCOMBE BLVD.
FCT12.5015
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 DIRECTOR
Name KIES, MERRILL DR.
Address 1400 HOLCOMBE BLVD
FC9.3020
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

Title DIRECTOR
Name MINSKY, BRUCE DR.
Address 1515 HOLCOMBE BLVD
B2.4583
City-State-Zip: HOUSTON TX 77030