

2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000000870

Entity Name: PRIME MEDICAL OPERATING, INC.**Current Principal Place of Business:**9825 SPECTRUM DR
BLDG 3
AUSTIN, TX 78717**Current Mailing Address:**9825 SPECTRUM DR
BLDG 3
AUSTIN, TX 78717 US**FEI Number:** 13-3044748**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	SECRETARY
Name	DAVIS, CLINT
Address	9825 SPECTRUM DR BLDG 3
City-State-Zip:	AUSTIN TX 78717

Title	VP
Name	DAVIS, CLINT
Address	9825 SPECTRUM DR BLDG 3
City-State-Zip:	AUSTIN TX 78717

Title	PRESIDENT
Name	LINDER, WILLIAM
Address	9825 SPECTRUM DR BLDG 3
City-State-Zip:	AUSTIN TX 78717

Title	TREASURER
Name	CLARK, JAMES
Address	9825 SPECTRUM DR BLDG 3
City-State-Zip:	AUSTIN TX 78717

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

SIGNATURE: CLARK JAMES

TREASURER

02/27/2023

Electronic Signature of Signing Officer/Director Detail_____
Date