

**2022 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F13000001447

**Entity Name:** U.S. ANESTHESIA PARTNERS, INC.

**FILED**  
**Mar 30, 2022**  
**Secretary of State**  
**2683169417CC**

**Current Principal Place of Business:**

12222 MERIT DRIVE  
SUITE 700  
DALLAS, TX 75251

**Current Mailing Address:**

12222 MERIT DRIVE  
SUITE 700  
DALLAS, TX 75251 US

**FEI Number:** 46-0872971

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 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	DIRECTOR	Title	DIRECTOR
Name	HADLEY, CHRISTOPHER	Name	VANDEWATER, DAVID
Address	12222 MERIT DRIVE SUITE 700	Address	12222 MERIT DRIVE SUITE 700
City-State-Zip:	DALLAS TX 75251	City-State-Zip:	DALLAS TX 75251
Title	DIRECTOR	Title	DIRECTOR
Name	MOORJANI, DR. ARUN	Name	FLORES, DR. GARY
Address	12222 MERIT DRIVE SUITE 700	Address	12222 MERIT DRIVE SUITE 700
City-State-Zip:	DALLAS TX 75251	City-State-Zip:	DALLAS TX 75251
Title	DIRECTOR	Title	DIRECTOR
Name	HOLLIDAY, DR. J. SCOTT	Name	TAHERI, DR. PAUL
Address	12222 MERIT DRIVE SUITE 700	Address	12222 MERIT DRIVE SUITE 700
City-State-Zip:	DALLAS TX 75251	City-State-Zip:	DALLAS TX 75251
Title	DIRECTOR	Title	DIRECTOR
Name	SWYGERT, DR. THOMAS	Name	GILES, RANDY
Address	12222 MERIT DRIVE SUITE 700	Address	12222 MERIT DRIVE SUITE 700
City-State-Zip:	DALLAS TX 75251	City-State-Zip:	DALLAS TX 75251

**Continues on page 2**

*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:** LEN WRIGHT

**PRESIDENT**

**03/30/2022**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title           DIRECTOR  
Name           SPIRN, SAMUEL  
Address        12222 MERIT DRIVE  
                  SUITE 700  
City-State-Zip: DALLAS TX 75251

Title           PRESIDENT  
Name           WRIGHT, LEN  
Address        12222 MERIT DRIVE  
                  SUITE 700  
City-State-Zip: DALLAS TX 75251