2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000006545

City-St-Zip:

HAYS, KS 67601

Entity Name: WESTERN KANSAS UROLOGICAL ASSOCIATES, P.A.

FILED Mar 27, 2009 Secretary of State

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Current P	rincipal Plac	e of Business:	New Principal Place	New Principal Place of Business:	
2214 CAN HAYS, KS		RIVE, SUITE #308			
Current Mailing Address:			New Mailing Address:		
2214 CAN HAYS, KS	TERBURY DF 67601	RIVE, SUITE #308			
FEI Number:	: 48-0925222	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:	
HOLLAND, ELAIINE C/O UROPATH LLC 3355 CLARK ROAD SARASOTA, FL 34231 US			HOLLAND, ELAIINE C/O UROPATH LLC 1314 SUMTER ST LEESBURG, FL 3474:	C/O UROPATH LLC	
The above in the State	named entity e of Florida.	submits this statement for the p	ourpose of changing its registered	d office or registered agent, or both,	
SIGNATURE:				03/27/2009	
Electronic Signature of Registered Agent			ent	Date	
Election Car	mpaign Financir	ng Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PC (WERTH, DARI 3711 FAIRWA HAYS, KS 676	Υ	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	STVC (MCDONALD, R 107 E 23RD S HAYS, KS 676	TREET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	ST (CURRY, WALI 1415 W 42ND		Title: Name: Address:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

City-St-Zip:

SIGNATURE: DARRELL D. WERTH PC 03/27/2009