2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 02, 2009
Secretary of State

DOCUMENT# F07000000703

Entity Name: M. D. ANDERSON SERVICES CORPORATION

Current Principal Place of Business:

7505 SOUTH MAIN ST, SUITE 500
HOUSTON, TX 77030

New Principal Place of Business:

Current Mailing Address:

7505 SOUTH MAIN ST, SUITE 500
HOUSTON, TX 77030

New Mailing Address:

FEI Number: 76-0300816 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: PCEO ( ) Delete
Name: WILFONG, HUGH C II
Address: 7505 SOUTH MAIN ST, SUITE 500
City-St-Zip: HOUSTON, TX 77030

Title: DEVP ( ) Delete
Name: LEACH, LEON J
Address: 7505 SOUTH MAIN ST, SUITE 500
City-St-Zip: HOUSTON, TX 77030

Title: DVP ( ) Delete
Name: FONTAINE, R. DAN
Address: 7505 SOUTH MAIN ST, SUITE 500
City-St-Zip: HOUSTON, TX 77030

Title: D ( ) Delete
Name: SHINE, KENNETH I M.D.
Address: 601 COLORADO STREET, RM 204
City-St-Zip: AUSTIN, TX 787012982

Title: D ( ) Delete
Name: KELLEY, SCOTT C ED.D.
Address: 201 WEST 7 STREET, RM 206
City-St-Zip: AUSTIN, TX 787012982

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: C (X) Change ( ) Addition
Name: LEACH, LEON J
Address: 7505 SOUTH MAIN ST, SUITE 500
City-St-Zip: HOUSTON, TX 77030

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: VP ( ) Change (X) Addition
Name: HYSLOP, WILLIAM A
Address: 7505 S. MAIN, SUITE 500
City-St-Zip: HOUSTON, TX 77030

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

SIGNATURE: WILLIAM A. HYSLOP EVP 02/02/2009

Electronic Signature of Signing Officer or Director — Date