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FILED  
May 12 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P93000008810 (2)

1. Corporation Name  
UROCATH CORPORATION



Principal Place of Business  
265 E 100 SOUTH  
SUITE 220  
SALT LAKE CITY UT 84111-616  
US

Mailing Address  
265 E 100 S  
SUITE 220  
SALT LAKE CITY UT 84111-616  
US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business  
21 173 CONSTITUTION DRIVE  
Suite, Apt. #, etc.  
22  
City & State  
23 MENLO PARK, CA  
Zip  
24 94025  
Country  
25 USA  
2a. Mailing Address  
26 173 CONSTITUTION DRIVE  
Suite, Apt. #, etc.  
27  
City & State  
28 MENLO PARK, CA  
Zip  
29 94025  
Country  
30 USA

3. Date Incorporated or Qualified  
02/04/1993  
4. FEI Number  
59-3264306  
Applied For  
Not Applicable  
5. Certificate of Status Desired ☐ \$8.75 Additional  
Fee Required  
6. Election Campaign Financing  
Trust Fund Contribution ☐ \$5.00 May Be  
Added to Fees  
8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☐ Yes ☐ No N/A

9. Name and Address of Current Registered Agent

MCNAMARA, THOMAS P  
2929 BAY TO BAY BLVD  
SUITE 309  
TAMPA FL 33629

10. Name and Address of New Registered Agent

81 Name  
DAVIS, RICHARD C., M.D.  
82 Street Address (P.O. Box Number is Not Acceptable)  
4820 LONGWATER WAY  
83  
84 City  
TAMPA  
FL 85 Zip Code  
33615

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE RICHARD C. DAVIS, M.D., DIRECTOR

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent Signature required when reinstating)

DATE

4/23/98

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
D	DAVIS, RICHARD C	WATER FORD PLZ 7650 COURTNEY CAMPBELL CAUS	TAMPA FL	<input type="checkbox"/>
D	HALE, ERIC B	265 E 100 S STE 220	SALT LAKE CITY UT 16	<input checked="" type="checkbox"/>
D	AYES, GREGORY S	265 E 100 S STE 220	SALT LAKE CITY UT 16	<input checked="" type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

13. (SEE ALSO THE SUPPLEMENTAL SHEET) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP	2.1 TITLE	2.2 NAME	2.3 STREET ADDRESS	2.4 CITY-ST-ZIP	3.1 TITLE	3.2 NAME	3.3 STREET ADDRESS	3.4 CITY-ST-ZIP	4.1 TITLE	4.2 NAME	4.3 STREET ADDRESS	4.4 CITY-ST-ZIP	5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS	5.4 CITY-ST-ZIP	6.1 TITLE	6.2 NAME	6.3 STREET ADDRESS	6.4 CITY-ST-ZIP
C/D	DAVIS, RICHARD C., M.D.	4820 LONGWATER WAY	TAMPA, FL 33615																				

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE RICHARD C. DAVIS, M.D.

4/23/98 (813) 282-4191

CR2E034 (10/97)