

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 23, 2006 08:00 AM
Secretary of State

DOCUMENT # P98000087929

1. Entity Name
USP WINTER PARK, INC.



Principal Place of Business
**15305 DALLAS PKWY., STE. 1600, LB 28
ADDISON, TX 75001 US**

Mailing Address
**15305 DALLAS PKWY., STE. 1600, LB 28
ADDISON, TX 75001 US**



01052006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
75-2785714

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM
1200 S. PINE ISLAND RD.
PLANTATION, FL 33324**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

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

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**1100000399434
02/01/06-80009-025 150.00**

10. OFFICERS AND DIRECTORS

TITLE	CEO
NAME	STEEN, DONALD E
STREET ADDRESS	15305 DALLAS PKWY., STE. 1600, LB 28
CITY-ST-ZIP	ADDISON, TX 75001
TITLE	VPS
NAME	WELLIK, JOHN J
STREET ADDRESS	15305 DALLAS PKWY., STE. 1600, LB 28
CITY-ST-ZIP	ADDISON, TX 75001
TITLE	P
NAME	WILCOX, WILLIAM E
STREET ADDRESS	15305 DALLAS PKWY., STE. 1600, LB 28
CITY-ST-ZIP	ADDISON, TX 75001
TITLE	AS
NAME	JENKINS, ALEX
STREET ADDRESS	15305 DALLAS PKWY #1600
CITY-ST-ZIP	ADDISON, TX 75001
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Alex Jenkins* **Alex Jenkins**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Date **1/16/06** Daytime Phone # **972-713-3514**