

Office of the Secretary of State Reports Unit P.O. Box 12028 Austin, Texas 78711-2028 (Form 803) Filed in the Office of the Secretary of State of Texas Filing #: 80469803 05/24/2015 Document #: 608248060002 Image Generated Electronically for Web Filing

ANNUAL STATEMENT - DOMESTIC PROFESSIONAL ASSOCIATION

File Number:	80469803	Year: 2015

- 1. The name of the professional association is: <u>PAUL M. FINE, M.D., OBSTETRICS AND</u> GYNECOLOGY ASSOCIATES
- 2. The name of the registered agent is: **Paul M Fine**
- 3. The registered office address, which is identical to the business office address of the registered agent in Texas, is:

5121 Oak Court, Dickinson, TX, USA 77539

- 4. Consent of Registered Agent
 - A. A copy of the consent of registered agent is attached.

OR

- B. The consent of the registered agent is maintained by the entity.
- 5. The names and addresses of all members of the association are:

Member 1	: (Individual Name) Pa	ıl M Fine, M.D.	STREET, SQUARE,
Address:	5121 Oak Court	Dickinson, TX, USA 77539	THE RESIDENCE

6. The names and addresses of all directors or executive committee members of the association are:

Director/Executive 1: (Individual Nam	e) Paul M Fine	⊤itle: Director
Address: 5121 Oak Court	Dickinson, TX, USA 77539	9

7. The names, addresses, and titles of all officers of the association are:

Officer 1: (Individual Name) Paul	M. Fine			Title:	President
Address: 5121 Oak Court	Dickinson,	TX,	USA	77539	
Officer 2: (Individual Name) Paul	M. Fine			Title:	Secretary
Address: 5121 Oak Court	Dickinson,	TX,	USA	77539	
Officer 3: (Individual Name) Paul	M. Fine			Title:	Treasurer
Address: 5121 Oak Court	Dickinson,	TX,	USA	77539	
Officer 4: (Individual Name) Paul	M. Fine			Title:	Vice-President

Address: 5121 Oak Court Dickinson, TX, USA 77539

8. All members are licensed to perform the type of professional service for which the association is formed; or, in the case of a multi-practice professional association, that each member is licensed to perform professional services falling within the scope of practice of the practitioner.

Execution:

The undersigned affirms that the person designated as registered agent has consented to the appointment. The undersigned signs this document subject to the penalties imposed by law for the submission of a materially false or fraudulent instrument and certifies under penalty of perjury that the undersigned is authorized under the provisions of law governing the entity to execute the filing instrument.

Date: May 24, 2015 Paul M. Fine, M.D.

Signature of authorized officer

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