

**Form 803—General Information**  
**(Annual Statement – Professional Association)**

**The attached form is drafted to meet minimal statutory filing requirements pursuant to the relevant code provisions.** *This form and the information provided are not substitutes for the advice and services of an attorney and tax specialist.*

**Commentary**

A professional association is required by law to file an annual statement regarding licensure that lists the names and addresses of all members, officers, and directors of the association. The annual statement must be completed and filed with the Office of the Secretary of State by June 30th. The due date of the annual statement is not dependent upon the date of formation of the professional association. Failure to file the statement when due will result, after notice, in the involuntary dissolution or termination of the domestic professional association or the revocation of the registration of the foreign professional association. This form has been promulgated to comply with the provisions of the Texas Business Organizations Code (BOC) as well as prior law regarding the periodic report. There are not substantive differences in the filing of the report under prior law and under the BOC. Consequently, instructions for the form only make statutory references to the BOC.

**Instructions for Form**

- **File Number:** It is recommended that the file number assigned by the secretary of state be provided to facilitate processing of the document.
- **Report Year:** Provide the report year in the space provided.
- **1—Association Name:** Provide the legal name of the professional association. Changes to the name of the professional association require an amendment to the articles of association.
- **2—Association Address:** Provide the address of the principal office of the professional association.
- **3—Registered Agent:** The registered agent can be either: (A) a domestic entity, or a foreign entity that is registered to do business in Texas; or (B) an individual resident of the state. The association cannot act as its own registered agent; do not enter the association name as the name of the registered agent.
- **4—Registered Office Address:** The registered office address is the business office address of the professional association’s registered agent. The registered office must be located at a street address where service of process may be personally served on the professional association’s registered agent during normal business hours. Provide the street or building address, including apartment or suite number, city, state, and zip code. A post office box is not sufficient as a registered office address unless the office is located in a city with a population of less than 5,000.

Please note that a document on file with the secretary of state is a public record that is subject to public access and disclosure. When providing address information for a director, executive committee member, or officer, use a business or post office box address rather than a residence address if privacy concerns are an issue.

When completing items 5 through 7, please set forth the full name of the individual in the space provided. The use of prefixes and/or suffixes, with the exception of those necessary to distinguish one individual from another (i.e. Jr., Sr., III) will fail to return a match on a name when conducting searches in our system. For this reason

titles, such as Mr., Mrs. or Dr., are not to be included when typing in an individual's first name field. Neither should professional designations, such as M.D., D.D.S., or Esq., be added to the last name field.

- **5—Members:** Provide the name and address of each member of the professional association. Each member must be an individual licensed to render the professional service of the association. If the space provided is insufficient, include the information as an attachment to this form for item 5.
- **6—Directors or Executive Committee Members:** A professional association is managed either by a board of directors or executive committee. Provide the name and address of each member of the board of directors or executive committee. Each director or committee member must be a member of the association whose name appears in item 5. If the space provided is insufficient, include the information as an attachment to this form for item 6.
- **7—Officers:** The officers of a professional association shall include a president, vice-president, secretary, and treasurer. Provide the name, address, and title of each officer. Any one person may serve in more than one office provided that the offices of president and secretary are not held by the same person unless the association is a single member association. The president of a professional association must be a member of the board of directors or executive committee. If the space provided is insufficient, include the information as an attachment to this form for item 7.
- **8—Statement of Licensure:** The annual statement must include a statement that all members are licensed to perform the type of professional service for which the association is formed. In the case of a multi-practice professional association, the annual statement includes a statement that each member is licensed to perform professional services falling within the scope of practice of the practitioner.

**Execution:** An officer of the professional association must sign the annual statement. However, before signing, please read the statements on this form carefully. *A person commits an offense under section 4.008 of the BOC if the person signs or directs the filing of a filing instrument the person knows is materially false with the intent that the instrument be delivered to the secretary of state for filing. The offense is a Class A misdemeanor unless the person's intent is to harm or defraud another, in which case the offense is a state jail felony.*

**Delivery Instructions:** Mail the completed form, along with the required filing fee, to the mailing address shown in the header of the annual statement form. If a document is to be delivered to the office in a manner other than through the U.S. Post Office, the envelope may be addressed or delivered to: Secretary of State, Reports Unit, 1019 Brazos, Suite 505, Austin, Texas 78701. Please make a copy of the completed form prior to mailing and retain for the professional association's records. Upon filing the document, the secretary of state will return the appropriate evidence of filing to the submitter together with a file-stamped copy of the document, if a duplicate copy was provided for such purpose. If a document is transmitted by fax to the fax number shown on the annual statement, then a completed Reports Unit Payment Form must accompany the transmission (Form 815). The form is available from the secretary of state web site at: [http://www.sos.state.tx.us/corp/forms\\_reports.shtml](http://www.sos.state.tx.us/corp/forms_reports.shtml).

**Filing Fee:** The filing fee for an annual statement is **\$35**. If the association becomes delinquent for failure to file the annual statement by June 30<sup>th</sup>, the association will be notified by certified mail, of their delinquency. Failure to file an annual statement within ninety (90) days of the delinquency notice will result in involuntary dissolution, termination, or revocation of the professional association pursuant to applicable law.

A professional association that has been involuntarily dissolved for non-tax reasons and has not filed for Early Adoption (Form 808) may be reinstated only during the thirty-six (36) month period following the involuntary dissolution. A professional association may reinstate by filing the required annual statement(s), an application for reinstatement, and paying the applicable filing fee (**\$35** filing fee for each required annual statement and a

**\$75** filing fee for the application for reinstatement). An application for reinstatement must be accompanied by a tax clearance letter from the Texas Comptroller of Public Accounts stating that the filing entity has satisfied all franchise tax liabilities and may be reinstated. Contact the Comptroller for assistance in complying with franchise tax filing requirements and obtaining the necessary tax clearance letter by email at: [tax.help@cpa.state.tx.us](mailto:tax.help@cpa.state.tx.us) or by calling (800) 252-1381 or (512) 463-4600.

However, a professional association created after December 31, 2005, or a professional association that has filed for Early Adoption (Form 808), may reinstate at any time. A professional association may reinstate by filing the required annual statement(s), a certificate of reinstatement, and paying the applicable filing fee (**\$35** filing fee for each required annual statement and a **\$75** filing fee for the certificate of reinstatement). A certificate of reinstatement must be accompanied by a tax clearance letter from the Texas Comptroller of Public Accounts stating that the filing entity has satisfied all franchise tax liabilities and may be reinstated. Contact the Comptroller for assistance in complying with franchise tax filing requirements and obtaining the necessary tax clearance letter by email at: [tax.help@cpa.state.tx.us](mailto:tax.help@cpa.state.tx.us) or by calling (800) 252-1381 or (512) 463-4600.

**Payment Instructions:** Payment may be made by: (1) personal check or money order; (2) a valid VISA<sup>®</sup>, MasterCard<sup>®</sup>, or Discover<sup>®</sup> credit card; or (3) a LegalEase<sup>™</sup> debit card. Checks submitted must be payable through a U.S. bank or financial institution and made payable to the Secretary of State. Fees paid by credit card are subject to a statutorily authorized convenience fee of 2.7% of the total fees incurred.

Revised 09/09

**Form 803**  
**(revised 09/09)**

This space reserved for filing office use.



Return in Duplicate to:  
Secretary of State  
P.O. Box 12028  
Austin, TX 78711-2028  
Phone: 512/475-2705  
Fax: 512/463-1423  
Dial: 7-1-1 for Relay Services  
**Filing Fee: See Instructions**

**Annual Statement**  
**of a**  
**Professional Association**

**File Number:** \_\_\_\_\_ **Year:** \_\_\_\_\_

1. The association name is: \_\_\_\_\_  
2. Its address is: \_\_\_\_\_  
*Address City State Zip Code*

3. The name of the registered agent is:  
 A. The registered agent is an organization (cannot be corporation named above) by the name of:

**OR**  
 B. The registered agent is an individual resident of the state whose name is:

*First Name MI Last Name Suffix*  
4. The registered office address, which is identical to the business office address of the registered agent in Texas, is: (use street or building address; see Instructions)

\_\_\_\_\_ TX  
*Street Address City State Zip Code*

5. The names and addresses of all members of the professional association are:  
(If additional space is needed, include the information as an attachment to this form for item 5.)

<i>First Name</i>	<i>MI</i>	<i>Last Name</i>	<i>Suffix</i>	
<i>Street or Mailing Address</i>		<i>City</i>	<i>State</i>	<i>Zip Code</i>

<i>First Name</i>	<i>MI</i>	<i>Last Name</i>	<i>Suffix</i>	
<i>Street or Mailing Address</i>		<i>City</i>	<i>State</i>	<i>Zip Code</i>

<i>First Name</i>	<i>MI</i>	<i>Last Name</i>	<i>Suffix</i>	
<i>Street or Mailing Address</i>		<i>City</i>	<i>State</i>	<i>Zip Code</i>

<i>First Name</i>	<i>MI</i>	<i>Last Name</i>	<i>Suffix</i>	
<i>Street or Mailing Address</i>		<i>City</i>	<i>State</i>	<i>Zip Code</i>

6. The names and addresses of all directors or executive committee members of the professional association are: (each must be a licensed member named in item 5.)  
 (If additional space is needed, include the information as an attachment to this form for item 6.)

<i>First Name</i>	<i>MI</i>	<i>Last Name</i>	<i>Suffix</i>		
<i>Street or Mailing Address</i>		<i>City</i>	<i>State</i>	<i>Zip Code</i>	<i>Country</i>

<i>First Name</i>	<i>MI</i>	<i>Last Name</i>	<i>Suffix</i>		
<i>Street or Mailing Address</i>		<i>City</i>	<i>State</i>	<i>Zip Code</i>	<i>Country</i>

<i>First Name</i>	<i>MI</i>	<i>Last Name</i>	<i>Suffix</i>		
<i>Street or Mailing Address</i>		<i>City</i>	<i>State</i>	<i>Zip Code</i>	<i>Country</i>

7. The names, addresses, and titles of all officers of the professional association are: (each must be a licensed member named in item 5. All offices must be filled. One person may hold all offices in a one-person association.)  
 (If additional space is needed, include the information as an attachment to this form for item 7.)

					<b>Officer Title</b>
					<b>President</b>
<i>First Name</i>	<i>MI</i>	<i>Last Name</i>	<i>Suffix</i>		
<i>Street or Mailing Address</i>		<i>City</i>	<i>State</i>	<i>Zip Code</i>	<i>Country</i>

					<b>Officer Title</b>
					<b>Vice President</b>
<i>First Name</i>	<i>MI</i>	<i>Last Name</i>	<i>Suffix</i>		
<i>Street or Mailing Address</i>		<i>City</i>	<i>State</i>	<i>Zip Code</i>	<i>Country</i>

					<b>Officer Title</b>
					<b>Secretary</b>
<i>First Name</i>	<i>MI</i>	<i>Last Name</i>	<i>Suffix</i>		
<i>Street or Mailing Address</i>		<i>City</i>	<i>State</i>	<i>Zip Code</i>	<i>Country</i>

					<b>Officer Title</b>
					<b>Treasurer</b>
<i>First Name</i>	<i>MI</i>	<i>Last Name</i>	<i>Suffix</i>		
<i>Street or Mailing Address</i>		<i>City</i>	<i>State</i>	<i>Zip Code</i>	<i>Country</i>

8. All members are licensed to perform the type of professional service for which the association is formed; or, if applicable, each member is licensed to perform professional services falling within the scope of practice of the practitioner.

**Execution:**

The undersigned signs this document subject to the penalties imposed by law for the submission of a materially false or fraudulent instrument.

Date: \_\_\_\_\_

\_\_\_\_\_  
 Signature of authorized officer