

10/10

2000 UNIFORM BUSINESS REPORT (UBR)

3/2/01

DOCUMENT # F98000002763

1. Entity Name

PHYSICIANS FOR SOCIAL RESPONSIBILITY, INC.

FILED

00 MAY 16 PM 3:43

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business

1101 14TH ST NW, SUITE 700
WASHINGTON DC 20005

Mailing Address

1101 14TH ST NW, SUITE 700
WASHINGTON DC 20005-5601

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, Etc.

Suite, Apt #, Etc.

City & State

City & State

4. FE Number 23-7059731

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desires

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

STRAUSS, ABBEY MD
1050 NW 15TH ST #207
BOCA RATON FL 33486

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

7. Name and Address of New Registered Agent

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.

SIGNATURE

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

(Note: Registered Agents are required to register)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution.

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '00

TITLE Delete
NAME D
HARRIS, ANDREW MD
STREET ADDRESS 2065 HIGH ST SE
CITY-ST-ZIP SALEM OR 97302

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Delete
NAME T
KEYSERLING, HARRY MD
STREET ADDRESS 2040 RIDGWOOD DR. NE STE 163
CITY-ST-ZIP ATLANTA GA 30322

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Delete
NAME D
ALEXANDER, SIDNEY MD
STREET ADDRESS 116 MANET RD
CITY-ST-ZIP CHESTNUT HILL MA 02167

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Delete
NAME O
CAZORT, RALPH J MD
STREET ADDRESS 2509 WALKER LANE
CITY-ST-ZIP NASHVILLE TN 37207

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Delete
NAME P
HOBBINS, THOMAS E MD
STREET ADDRESS 6701 N. CHARLES ST.
CITY-ST-ZIP BALTIMORE MD 21204

TITLE Change Addition
NAME President
Wilk, Peter, MD
STREET ADDRESS HC 75 Box 1600, Dyke Mt. Rd. Fire Lane 52C
CITY-ST-ZIP East Sebago, ME 04029

TITLE Delete
NAME D
DICKEY, JEFFERSON MD
STREET ADDRESS 25 MAPLE ST
CITY-ST-ZIP FLORENCE MA 01060

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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 617, 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:

Robert K. Musil, Ph.D. ROBERT K. MUSIL, Ph.D.

2/21/00

202-898-0150

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone

KE

6765
F9800000 2763

Zofz

Lachlan B. Forrow, MD
86 Varick Road
Newton, MA 02168
617-964-7726

Erica Frank, M.D., MPH
68 Butler Street
Atlanta, GA 30303
404-616-5603

Howard Frumkin, MD
Emory University - Sch. of Public Health
1518 Clifton Road, Room 220
Atlanta, GA 30322
404-727-3697

Lynn Goldman, MD, MPH
111 Market Place, #850
Baltimore, MD 21202
410-614-0226

Robert Gould, MD
311 Douglas
San Francisco, CA 94114
408-972-7299

Jimmy Hara, MD
5773 Lubao Ave.
Woodland Hills, CA 91367
323-783-8969

Andrew Harris, MD
2065 High Street S.E.
Salem, OR 97302
503-585-2022

Ira Helfand, MD
371 Audubon Road
Leeds, MA 01053
413-582-2108

Thomas E. Hobbins, MD
Maryland Sleep Disorders Center
6701 North Charles Street
Unit 41, Room 4140

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PHYSICIANS FOR SOCIAL RESPONSIBILITY, INC.

OFFICERS AND DIRECTORS

OFFICERS

President

Peter Wilk, MD
HC 75 Box 1600
Dyke Mt. Rd. Fire Lane 52-C
East Sebago, ME 04029
207-772-6710

President Elect

Lee Francis, MD
4204 N. Greenview Ave.
Chicago, IL 60613
312-666-3488

Treasurer

Harry Keyserling, MD
2040 Ridgewood Drive, NE, 163
Atlanta, GA 30322
404-727-5642

Executive Director/CEO

Robert K. Musil, Ph.D.
Executive Director/CEO
1101 14th Street NW, #700
Washington, DC 20005
202-898-0150 ext. 221

DIRECTORS

Sidney Alexander, MD
116 Manet Road
Chestnut Hill, MA 02167
617-273-8461

Dorothy Anderson, MD
305 South Morgan St.
Mason City, IL 62664
217-482-3014

Prochista Ariana
909 South 5th Street, #665

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Champaign, IL 61820
217-332-4894

John M. Balbus, MD, MPH
2300 K. Street, N.W., #201
Washington, DC 20037
202-994-1734

Ralph J. Cazort, MD
2509 Walker Lane
Nashville, TN 37207
615-327-6510

Ben Cohen
30 community Dr.
South Burlington, VT 05403
802-651-9600

Jefferson Dickey, MD
Cooley Dickinson Occupational Health Service
25 Maple Street
Florence, MA 01060
413-586-0650

Jack Downes, MD
Dept. Of Anesthesiology & Critical Care
Children's Hospital of Philadelphia
34th Street and Civic Center Blvd.
Philadelphia, PA 19104
215-590-1862

Cathey Falvo, MD
412 Benedict Ave., 6C
Tarrytown, NY 10561
914-594-4323

Roy Farrell
1403 McGilvra Blvd. E
Seattle, WA 98112
206-995-7011

Paul Fisher, MD
119 East Main Street
Port Jefferson, NY 11777
631-474-1851

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F98000002763
5066

Baltimore, MD 21204
410-494-9773

James E. Jones
607 Hilltop Dr.
New Cumberland, PA 17070
717-774-2315

Daniel Kerlinsky, MD
2900 Foraker Place, NW
Albuquerque, NM 87107
505-881-1123

Alan Lockwood, MD
85 Beard Ave.
Buffalo, NY 142214
716-862-8871

Irving Mauss, MD
146-15 Rockaway Beach Blvd.
Neponsit, NY 11694
202-898-0150

Clara Michael, MD
625 North Perrys Hollow Road.
Salt Lake City, Utah 84013
801-355-8841

Willard S. Osibin, MD
1050 Las Tablas Road, Suite 6
Templeton, CA 93465
805-434-1421

John Pastore, MD
736 Cambridge St.
Boston, MA 02135
617-789-5173

Jeff Patterson, DO
2532 Balden Street
Madison, WI 53713
608-241-9020

Jose Quiroga, MD
19756 Gilmore St.

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F98000002763

Ballo

Woodland Hills, CA 91367
562-494-5444

Amelia Randolph
3540 Durocher #2
Montreal, QC H2X2E5
514-842-7416

Karin Ringler, Ph.D.
1240 Dartmouth Road
Madison, WI 53705
414-229-6579

David Rush, MD
68 Foster Street
Cambridge, MA 02138
617-556-3320

Amy Catherine Sisley, MD, MPH
University of Arizona, Dept. of Surgery
1501 N. Campbell, Box 245063
Tucson, AZ 85724
520-626-4819

Abby Strauss, MD
1050 NW 15th Street, #207
Boca Raton, FL 33486
561-391-6110

James Trombold, MD
4851 88th Place, SE
Mercer Island, WA 98040
202-898-0150