FILED
Feb 26, 2007 0
Secretary of

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P03000061305

1. Entity Name
WESTBURY INVESTMENTS, INC.

Principal Place of Business	Mailing Address
2390 NORTH TAMIAMI TRAIL SUITE 204 NAPLES, FL 34103 US	2390 NORTH TAMIAMI TRAIL SUITE 204 NAPLES, FL 34103 US

DO NOT WRITE IN THIS SPACE

01152007 No Chg-P CR2E034 (11/05)

4. FEI Number
86-1139153

☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

PASSIDOMO, KATHLEEN C ESQ.
2390 NORTH TAMIAMI TRAIL
SUITE 204
NAPLES, FL 34103

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2007 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

U00000643457
03/07/07-80050-010 150.00

10. OFFICERS AND DIRECTORS

TITLE	DP
NAME	SHELDRAKE, ROGER F
STREET ADDRESS	CHURCH FARM, NARBOROUGH KINGS LYNN
CITY-ST-ZIP	PE321TG, U.K.,
TITLE	DS
NAME	HEDINGER, ALFRED
STREET ADDRESS	%KATHLEEN PASSIDOMO 2390 N TAMIAMI TR #204
CITY-ST-ZIP	NAPLES, FL 34103
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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: Roger Sheldrake, Pres. 2/21/07
SIGNATURE AND TYPED OR PRINTED NAME OF PERSON, OFFICER OR DIRECTOR — Date — Daytime Phone #