

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED

03 MAR 27 AM 10:49

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F55958

1. Entity Name
JOSEPH L. WEBSTER, SR., M.D., P.A.



Principal Place of Business
1214 N MAGNOLIA DRIVE
TALLAHASSEE, FL 32308 US

Mailing Address
1214 N MAGNOLIA DRIVE
TALLAHASSEE, FL 32308 US

2. Principal Place of Business
2048 CENTRE POINTE LANE
Suite, Apt. #, etc.

3. Mailing Address
2048 CENTRE POINTE LANE
Suite, Apt. #, etc.



☒ CHECK HERE IF MAKING CHANGES

City & State
TALLAHASSEE, FLORIDA

City & State
TALLAHASSEE, FLORIDA

4. FEI Number
59-2139085

Applied For
Not Applicable

Zip
32308

Country
USA

Zip
32308

Country
USA

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HIGHTOWER, ROBERT S
241 E VIRGINIA ST
TALLAHASSEE, FL 32301

Name

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

City

FL

Zip Code

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 UBR if applicable.

(NOTE: Registered Agent signature required when registering)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PST
WEBSTER, JOSEPH L
1214 N MAGNOLIA DRIVE
TALLAHASSEE, FL 32308 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PST
WEBSTER, JOSEPH L., SR.
2048 CENTRE POINTE LANE
TALLAHASSEE, FL 32308 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
WEBSTER, JOSEPH L
1214 N MAGNOLIA DRIVE
TALLAHASSEE, FL 32308 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
WEBSTER, JOSEPH L., SR.
2048 CENTRE POINTE LANE
TALLAHASSEE, FLORIDA 32308 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
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CITY-ST-ZIP
500015291785
04/03/03--01043--031--**150.00 ☐ Change ☐ Addition

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CITY-ST-ZIP
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1), 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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)

3/25/03

21 3/25