

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # K21016

1. Entity Name

R.L. WESTBERRY, PH.D., PA

Principal Place of Business

% R. L. WESTBERRY  
3470 NE 17TH WAY  
FT LAUDERDALE FL 33334

Mailing Address

% R. L. WESTBERRY  
3470 NE 17TH WAY  
FT LAUDERDALE FL 33334

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0039807

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

## 6. Name and Address of Current Registered Agent

WESTBERRY, R. L.  
3470 NE 17TH WAY  
FT LAUDERDALE FL 33334

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2002 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
Trust Fund Contribution.

**\$5.00** May Be  
Added to Fees

## 11. OFFICERS AND DIRECTORS

TITLE PD  
NAME WESTBERRY, RICHARD L.  
STREET ADDRESS 3470 NE 17TH WAY  
CITY-ST-ZIP FT LAUDERDALE FL

Delete

TITLE D  
NAME WESTBERRY, LYNNE  
STREET ADDRESS 3470 NE 17TH WAY  
CITY-ST-ZIP FT LAUDERDALE FL

Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

Delete

## 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

Change  Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

Change  Addition

Change  Addition

Change  Addition

Change  Addition

CR2E034 (9/01)

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 changed, or on an attachment with an address, with all other like empowered.

RICHARD L. WESTBERRY, PH.D.

4/23/02

SIGNATURE:

*Richard L. Westberry*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #