

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000108530

**Entity Name:** LAW OFFICE OF RUSSELL B. POOLE, P.A.

**Current Principal Place of Business:**

2 WALBURG STREET  
GREEN COVE SPRINGS, FL 32043

**Current Mailing Address:**

2 WALBURG STREET  
GREEN COVE SPRINGS, FL 32043 US

**FEI Number: 26-1412844**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

POOLE, RUSSELL B  
2 WALBURG STREET  
GREEN COVE SPRINGS, FL 32043 US

*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:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Officer/Director Detail :**

Title	P	Title	VP
Name	POOLE, RUSSELL B	Name	POOLE, RUSSELL B
Address	2 WALBURG STREET	Address	2 WALBURG STREET
City-State-Zip:	GREEN COVE SPRINGS FL 32043	City-State-Zip:	GREEN COVE SPRINGS FL 32043

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE: RUSSELL POOLE**

**PRESIDENT**

**08/25/2017**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date