2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 307231

Entity Name: RUSSELL ASSOCIATES INC

FILED Sep 14, 2006 Secretary of State

Current Principal Place of Business:			New Princ	New Principal Place of Business:	
	SE RD STE 300 FRICHEY, FL) 346545111 US			
Current Mailing Address:			New Maili	New Mailing Address:	
10540 RIDGE RD STE 300 NEW PORT RICHEY, FL 346545111 US					
FEI Number: 11-3168492 FEI Number Applied For () FEI Num			lumber Not App	licable () Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301 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	
OFFICERS AND DIRECTORS: ADDI				IS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () I HAAS, RICHARD 5755 RIO VISTA CLEARWATER,	DRIVE	Title: Name: Address: City-St-Zip:	P (X) Change () Addition STEVENS, DONALD, 2200 NORTHERN BLVD. EAST HILLS, NY 11548	
Title: Name: Address: City-St-Zip:	CS () I BARTLETT, MAR 2200 NORTHERI EAST HILLS, NY	I BLVD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () E KRASNOFF, ERI 2200 NORTHERI EAST HILLS, NY	N BLVD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () [WILSON, MARCI 2200 NORTHERI EAST HILLS, NY	N BLVD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	WESTERN, JAM 10540 RIDGE RI		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	T () I MCDERMOTT, L 2280 NORTHERI FAST HILLS NY	NBLVD.	Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: MARYANN BARTLETT CS 09/14/2006