

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 23, 2004 8:00 am
Secretary of State

01-23-2004 90034 005 ***150.00

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| DOCUMENT # 373277 1. Entity Name RUSSELL HERIG & ASSOCIATES, INC. | | | | | |
| Principal Place of Business 4007 N. 56TH STREET TAMPA, FL 33610 | | | | Mailing Address 4007 N. 56TH STREET TAMPA, FL 33610 | |
| 2. Principal Place of Business 1820 N TAYLOR RD <small>Suite, Apt. #, etc.</small> | | 3. Mailing Address P O BOX 803 <small>Suite, Apt. #, etc.</small> | | | |
| City & State BRANDON FL | | City & State BRANDON FL | | 4. FEI Number 59-1313510 | |
| Zip 33510 | | Country USA | | 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required | |
| 6. Name and Address of Current Registered Agent BUTLER, JAMES E 4007 N 56TH ST TAMPA, FL 33610 | | | | 7. Name and Address of New Registered Agent Name BUTLER, JAMES E Street Address (P.O. Box Number is Not Acceptable) 1820 N TAYLOR RD City BRANDON FL Zip Code 33510 | |
| 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 <u><i>James E Butler</i></u> JAMES E. BUTLER PRES. 1-11-04 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small> | | | | | |
| FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 | | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$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 | PD BUTLER, JAMES E 1820 NORTH TAYLOR ROAD BRANDON, FL 33510 | <input type="checkbox"/> Delete | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | SD SOULE, JENNIFER 1906 N TAYLOR RD BRANDON, FL 33510 | <input type="checkbox"/> Delete | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | TD BUTLER, BARBARA H 1820 NORTH TAYLOR ROAD BRANDON, FL 33510 | <input type="checkbox"/> Delete | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VD SOULE, RICHARD 1906 N TAYLOR RD BRANDON, FL 33510 | <input type="checkbox"/> Delete | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Delete | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Delete | | | |
| 12. 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 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: <u><i>James E Butler</i></u> JAMES E BUTLER 1/11/04 813/685-3111 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small> | | | | | |