## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# H85663

Name:

Address:

City-St-Zip:

796 EAGLE POINT DRIVE

ST. AUGUSTINE, FL 32092 US

Entity Name: EISMAN & RUSSO, INC.

FILED Mar 07, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 6455 POWERS AVE JACKSONVILLE, FL 32217 LIS **Current Mailing Address: New Mailing Address:** 6455 POWERS AVE JACKSONVILLE, FL 32217 US FEI Number: 59-2606484 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: GREENE, MICHAEL F 6455 POWERS AVE JACKSONVILLE, FL 32217 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 Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete () Change () Addition MAHFOUD, ANTONIO J Name: Name: 3746 CATHEDRAL OAKS PLACE S. Address: Address: JACKSONVILLE, FL 32217 City-St-Zip: City-St-Zip: ( ) Delete Title: Title: () Change () Addition Name: GREENE, MICHAEL F Name: 11909 HUGE EVERGREEN COURT Address: Address: JACKSONVILLE, FL 32223 City-St-Zip: City-St-Zip: VPD ( ) Delete Title: Title: () Change () Addition DANIEL, JAMES S Name: Name: 3320 BOWERS LANE Address: Address: City-St-Zip: JACKSONVILLE, FL 32257 City-St-Zip: Title: VPD () Delete Title: () Change () Addition PIELSTICK, BRETT H

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.

Name:

Address:

City-St-Zip:

SIGNATURE: MICHAEL F. GREENE STD 03/07/2007