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May 12 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K86775 (9)

1. Corporation Name
RUSSELL C. HART, INC.

Principal Place of Business

C/O RUSSELL C. HART
950 FIRST ST. S. STE #204
WINTER HAVEN FL 33880
US

Mailing Address

P.O. BOX 799
950 FIRST ST. S. STE 204
WINTER HAVEN FL 33882-0799
US



3. Date Incorporated or Qualified 05/09/1989
3a. Date of Last Report 05/01/1996

2. Principal Place of Business

21 2000 Executive Rd.

Suite, Apt #, etc.

22 City & State

23 Winter Haven, FL

Zip Country

24 33884

25

2a. Mailing Address

26 P.O. Box 799

Suite, Apt #, etc.

27 City & State

28 Winter Haven, FL

Zip Country

29 33882

30

4. FEI Number

59-2945951

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

HART, RUSSELL C.
950 FIRST ST., SOUTH
SUITE 204
WINTER HAVEN FL 33880

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

2000 Executive Road

83

84 City Winter Haven

FL

85 Zip Code 33884

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME HART, RUSSELL C.
STREET ADDRESS 950 1ST ST. S. STE 204
CITY-ST-ZIP WINTER HAVEN FL

TITLE ☐ DELETE

NAME HART, RUSSELL C.
STREET ADDRESS 950 1ST ST. S. STE 204
CITY-ST-ZIP WINTER HAVEN FL

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME
1.3 STREET ADDRESS 2000 Executive Road
1.4 CITY-ST-ZIP Winter Haven, Florida 33884

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS 2000 Executive Road
2.4 CITY-ST-ZIP Winter Haven, Florida 33884

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Russell C. Hart, Inc.

4/30/97 941-326-9700

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

0396218

CR2E034 (9/96)