2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 06, 2009
Secretary of State

DOCUMENT# L07000090371

Entity Name: RUSSELL BUSINESS, LLC

Current Principal Place of Business:

545 SANCUARY DRIVE
APT # 504
LONG BOAT KEY, FL 34228 US

New Principal Place of Business:

130 NORTH TAMIAMI TRAIL
SARASOTA, FL 34236 US

Current Mailing Address:

545 SANCUARY DRIVE
APT # 504
LONG BOAT KEY, FL 34228 US

New Mailing Address:

2250 GULFGATE DRIVE, SUITE J
SARASOTA, FL 34231

FEI Number: 26-4444577 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GARDI, LES CPA
7061 S. TAMIAMI TRAIL
SUITE C
SARASOTA, FL 34231 US

Name and Address of New Registered Agent:

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

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: RUSSELL, STEPHEN A
Address: 85 POLK DRIVE
City-St-Zip: SARASOTA, FL 34236 US

Title: MGR ( ) Delete
Name: RUSSELL, CLIVE S
Address: 545 SANCTUARY DRIVE; #504
City-St-Zip: LONGBOAT KEY, FL 34228 US

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: RUSSELL, STEPHEN A
Address: 2250 GULFGATE DRIVE, SUITE J
City-St-Zip: SARASOTA, FL 34231 US

Title: MGR (X) Change ( ) Addition
Name: RUSSELL, CLIVE S
Address: 2250 GULFGATE DRIVE, SUITE J
City-St-Zip: SARASOTA, FL 34231 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: STEPHEN RUSSELL MGR 04/06/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date