

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000062731

Entity Name: RUSSELL & GALLO, LLC

FILED  
Mar 13, 2009  
Secretary of State

## Current Principal Place of Business:

4501 N. WICKHAM ROAD  
SUITE 104  
MELBOURNE, FL 32935 US

## New Principal Place of Business:

3188 SUNTREE BLVD  
ROCKLEDGE, FL 32955 US

## Current Mailing Address:

4501 N. WICKHAM ROAD  
SUITE 104  
MELBOURNE, FL 32935 US

## New Mailing Address:

3188 SUNTREE BLVD  
ROCKLEDGE, FL 32955 US

FEI Number: 26-2874580

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

RUSSELL, DALE L  
4501 N. WICKHAM ROAD  
SUITE 104  
MELBOURNE, FL 32935 US

## Name and Address of New Registered Agent:

RUSSELL, DALE L  
3188 SUNTREE BLVD.  
ROCKLEDGE, FL 32955 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: DALE RUSSELL

03/13/2009

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: RUSSELL, DALE L  
Address: 2455 WILD WOOD DRIVE  
City-St-Zip: MELBOURNE, FL 32935 US

Title: MGR ( ) Delete  
Name: GALLO, GINA M  
Address: 3900 POSTRIDGE TRAIL  
City-St-Zip: MELBOURNE, FL 32934 US

## ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: DALE RUSSELL

MGR

03/13/2009

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