## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L64644

(2)

Mailing Address

RICHARD RUSSELL, INC.

Principal Place of Business

**FILED** 

May 07 1997 8:00am

Secretary of State

C/O H ALIAN WEBER WATER HARBERT & BATES? 225 E ROBINSON ST., STE 800 ORLANDO FL 32801 US		C/O H ALLAN WEBER MATEER HERBER &-BATES- 225 E ROBINSON ST., STE 600 ORLANDO FL 32801-4325 US		3. Date Incorporated or Qualified	3a. Date of		
2. Principal Place of Business					04/09/1990	06/13/1996	
Principal Pl	lace of Business ALLAN WEBER	28. Mailing Address COO H. ALLAN 26 MATEER & HARB	WEBER		4. FEI Number		Applied For
21 MATEER Suite, Apt.	Q HARBERT P A	26 MATEER & HARB	ERT,	P.A.	59-1518838		Not Applicable
<b>─</b> ─	•	Suite, Apt. #, etc.	۵.	<b>a</b>	5. Certificate of Status Desired		.75 Additional
City & State	Robinson St., Ste 60	City & State	on St	, Ste. 6		· · · · · · · · · · · · · · · · · · ·	<u>-</u>
<del></del> -	io, Florida	28 Orlando, Flor	140		6. Election Campaign Financing Trust Fund Contribution		5.00 May Be dded to Fees
Zip	Country	Zip Zip	Country	 {	8. This corporation has liability for i		
24 32801	25 US	29 32801 30	ี บร			Yes No	100.002.
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Re	gistered Agent	
	BER, H. ALLAN		81	Name			
				82 Street Address (P.O. Box Number is Not Acceptable)			
ORLANDO FL 32801			83				
			83				
			84	City		<b>-,</b> 85	Zip Code
11. Pureupol 6	to the provisions of Sections 667 Of 02	and 607 1509 Florido Statuto	the cha	o nomed sa	oration submits this statement for the p	FL	
I OTHER OF RE	<b>egistered age</b> nt, or both, in the State of	i Horida. Such change was aut	horized b	v the corporation	oration submits this statement for the pi ion's board of directors. I hereby accep	urpose of chan t the appointme	ging its registered ent as registered
· ·	m familiar with, and accept the obligati	ons of, Section 607.0505, Floric	ia Statute	Ś.			
SIGNATURE	Signature, typed or printed name of registered agent.	and title if applicable (NOT) : H	egistered Ag	ent signature require	od when reinstating)	DATE	
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFIC		CTORS IN 12
TITLE	D	XX DELETE	1.1 1111.8	D		<b>XX</b> 0	nange
NAME	RUSSELL, RICHARD B.		1.2 NAME	RU	JSSELL, RICHARD B.		
STREET ADDRESS	3788 SUTTERS MILL CR.		1.3 STREE	ADDRESS 13	3440 North 44th Stree	t, Apt.	1129
CITY-ST-ZIP	CASSELBERRY FL		1.4 CITY - 5	ST-ZIP Ph	noenix, Arizona 85032		
TITLE		DELETE	2.1 TITLE			L CI	nange Addition
NAME			2.2 NAME				
STREET ADDRESS			2.3 STREE				
CITY-ST-ZIP TITLE		☐ DELETE	2. 4 CITY-	ST-ZIP			T trade
NAME		☐ Ottte	3.1 TITLE 3.2 NAME		• •	CI	nange 🔲 Addition
STREET ADDRESS			3.3 STREE	Annarge	. ,		
CITY-ST-ZIP			3.4 CHY-				
TITLE		DELETE	4.1 111116	01 FII		C	nange Addition
NAME			4. 2 NAME				-
STREET ADDRESS			4.3 STREET	ADDRESS			
CITY-ST-ZIP			4.4 CITY - S	ST - ZIP			
TITLE		DELETÉ	5.1 TITLE			☐ Cł	nange 🔲 Addition
NAME			5.2 NAME				
STREET ADDRESS			5.3 \$1REE	ADDRESS			
CITY-ST-ZIP			5.4 CHY-5	61 - 71P			
TITLE		☐ DELETE	6.1 TITLE			[] Cł	nange L Addition
NAME			6.2 NAME				
STREET ADDRESS			63 STREET	ADDRESS			

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 if dyinged, or on an attachment with an address