

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 12, 2007 08:00 A
Secretary of State

DOCUMENT # P00000092400

1. Entity Name
RUSSAKIS HEDGING & TOPPING, INC.

Principal Place of Business
8801 INDRI0 RD.
FT. PIERCE, FL 34951

Mailing Address
8801 INDRI0 RD.
FT. PIERCE, FL 34951



01152007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-1142682

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

RUSSAKIS, JIM
8801 INDRI0 RD.
FT. PIERCE, FL 34951

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

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

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE PD
NAME RUSSAKIS, JIM
STREET ADDRESS 8801 INDRI0 RD.
CITY-ST-ZIP FT. PIERCE, FL 34951

TITLE ST
NAME RUSSAKIS, NICHOLAS
STREET ADDRESS 8801 INDRI0 ROAD
CITY-ST-ZIP FORT PIERCE, FL 34951

TITLE SD
NAME RUSSAKIS, NICK
STREET ADDRESS 8801 INDRI0 RD.
CITY-ST-ZIP FT. PIERCE, FL 34951

TITLE
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02/20/07-80053-018 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____

Jim G. Russakis 02/02/07 772-465-5355

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #