## **FILED** Jan 20, 2006 8:00 am Secretary of State

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ANNUAL REPORT	
DOCUMENT # P01000092328	
1. Entity Name	- 1

RUSSELL PROPERTIES REAL ESTATE, INC. Principal Place of Business Mailing Address 1232 W. INDIAN TOWN RD 1232 W. INDIAN TOWN RD 60004073 **SUITE 109 SUITE 109** JUPITER, FL 33458 JUPITER, FL 33458 2. Principal Place of Business 3. Mailing Address 186 Hampton Place Suite, Apt. #, etc. Suite, Apt. #, etc. 01162006 CR2E034 (11/05) Chg-P City & State City & State 4. FEI Number Applied For <u>Jupiter</u> **NOT APPLICABLE** Florida Not Applicable Zip Country Country Zip \$8.75 Additional 5. Certificate of Status Desired 3345B Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent HILLEY & WYANT-CORTEZ, P.A. Street Address (P.O. Box Number is Not Acceptable) 860 US HIGHWAY ONE SUITE 108 NORTH PALM BEACH, FL 33408 Zip Code 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 anolicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. TITLE ☐ Delete TITLE ☐ Change ■ Addition NAME RUSSELL, ROBERT E NAME 186 HAMPTON PLACE STREET ADDRESS STREET ADDRESS JUPITER, FL 33458 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete T131.E Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP ☐ Detete TITLE ☐ Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete 1M F 1m F ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIE

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:** 

Robert E. Russell