## 2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P01000119209

Entity Name: RUSSELL'S TAX SERVICE INC.

FILED May 17, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1490 SOUTH MILITARY TRAIL SUITE. 3 WEST PALM BEACH., FL 33415

Current Mailing Address: New Mailing Address:

1490 SOUTH MILITARY TRAIL SUITE. 3 WEST PALM BEACH,, FL 33415

FEI Number: 03-0385397 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

RUSSELL, ORMOND F SR
4851 ORLEANS COURT
APT. C

RUSSELL, ORMOND F
4851 ORLEANS COURT
APT. C

WEST PALM BEACH,, FL 33415 US WEST PALM BEACH,, FL 33415 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: ORMOND RUSSELL 05/17/2005

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete Title: (X) Change ( ) Addition RUSSELL, ORMOND F SR RUSSELL, ORMOND F Name: Name: 4851 ORLEANS COURT APT. C 4851 ORLEANS COURT APT. C Address: Address: City-St-Zip: WEST PALM BEACH, FL 33415 City-St-Zip: WEST PALM BEACH, FL 33415

Title: VP () Delete Title: VP (X) Change () Addition
Name: RUSSELL, ORMOND F JR Name: RUSSELL, ORMOND F
Address: 4851 ORLEANS COURT APT. C
Address: 4851 ORLEANS COURT APT. C

4851 ORLEANS COURT APT. C
WEST PALM BEACH, FL 33415
Address: 4851 ORLEANS COURT APT. C
City-St-Zip: WEST PALM BEACH, FL 33415

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ORMOND RUSSELL P 05/17/2005