


**2008 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jan 14, 2008 08:00 AM**  
**Secretary of State**

**DOCUMENT # P03000035093**  
1. Entity Name  
**RUSSELL BOATS, INC.**



Principal Place of Business  
**933 DODECANESE BOULEVARD  
TARPON SPRINGS, FL 34689**

Mailing Address  
**933 DODECANESE BOULEVARD  
TARPON SPRINGS, FL 34689**



**DO NOT WRITE IN THIS SPACE**

01082008 No Chg-P CR2E034 (11/05)

4. FEI Number  
**56-2338614**

Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent

**RUSSELL, JULIE  
933 DODECANESE BOULEVARD  
TARPON SPRINGS, FL 34689**

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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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2008 Fee will be \$550.00**

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

U00000781638  
01/15/08-80040-023 150.00

**10. OFFICERS AND DIRECTORS**

TITLE	D
NAME	RUSSELL, JOHN
STREET ADDRESS	933 DODECANESE BOULEVARD
CITY-ST-ZIP	TARPON SPRINGS, FL 34689
TITLE	D
NAME	RUSSELL, JULIE
STREET ADDRESS	933 DODECANESE BOULEVARD
CITY-ST-ZIP	TARPON SPRINGS, FL 34689
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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: John Russell **1/9/08** **727 942 4596**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #