

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000017445

FILED
Feb 04, 2011
Secretary of State

Entity Name: RUSSELL GROVE NORTH, INC.

Current Principal Place of Business:

109 ARRON DRIVE
LAKE PLACID, FL 33852

New Principal Place of Business:

Current Mailing Address:

109 ARRON DRIVE
LAKE PLACID, FL 33852

New Mailing Address:

FEI Number: 27-0200471

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RIDER, MICHAEL A
13 N. OAK AVENUE
LAKE PLACID, FL 33852 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: RUSSELL, ANDREW S
Address: 109 ARRON DRIVE
City-St-Zip: LAKE PLACID, FL 33852

Title: STD
Name: RUSSELL, MELISSA P
Address: 109 ARRON DRIVE
City-St-Zip: LAKE PLACID, FL 33852

Title: ASTT
Name: BOHANON, NIKI D
Address: 109 ARRON DRIVE
City-St-Zip: LAKE PLACID, FL 33852

Title: VPD
Name: RUSSELL, ANDREW S
Address: 109 ARRON DRIVE
City-St-Zip: LAKE PLACID, FL 33852

Title: VPD
Name: WALLER, CHRISTINA R
Address: 109 ARRON DRIVE
City-St-Zip: LAKE PLACID, FL 33852

I hereby 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 all other like empowered.

SIGNATURE: ANDREW S. RUSSELL

PD

02/04/2011

Electronic Signature of Signing Officer or Director

Date