

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 13, 2004 8:00 am
Secretary of State

04-13-2004 90027 004 ***150.00

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1. Entity Name
ELLIOTT & RUSSELL DEVELOPMENT, INC.



Principal Place of Business
1690 RAYMOND DIEHL RD.
C-6
TALLAHASSEE, FL 32308 US

Mailing Address
1690 RAYMOND DIEHL RD.
C-6
TALLAHASSEE, FL 32308 US

94051294



02102004 No Chg-P CR2E034 (10/03)

4. FEI Number
59-3246997

Applied For
Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

RUSSELL, DIXIE
1690 RAYMOND DIEHL ROAD
STE C-6
TALLAHASSEE, FL 32308

**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, 2004 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS

TITLE	S
NAME	ELLIOTT, SAM
STREET ADDRESS	1690 RAYMOND DIEHL RD., C-6
CITY-ST-ZIP	TALLAHASSEE, FL
TITLE	PVT
NAME	RUSSELL, DIXIE
STREET ADDRESS	1690 RAYMOND DIEHL RD., C-6
CITY-ST-ZIP	TALLAHASSEE, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify 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 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:

Dexter L. Russell
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-12-04

Date

850 385-4696

Daytime Phone #