

2002 **FOR PROFIT CORPORATION**  
**UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # 095000018502

1. Entity Name

RUSSEY'S INC.

FILED  
CLERK OF STATE  
DIVISION OF CORPORATION

02 FEB 22 PM 3:14

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

429 S. ATLANTIC BLVD

3. Mailing Address

2233 TECHNICAL PKWAY

Suite, Apt. #, etc.

Suite, Apt. #, etc.

#13

DO NOT WRITE IN THIS SPACE

City & State

FORT LAUDERDALE, FL

City & State

CHARLESTON, SC

4. FEI Number

58-2261103

Applied For

Not Applicable

Zip

33316

Country

US

Zip

29406

Country

US

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

7. Name and Address of Current Registered Agent

Name

THE PRENTICE HALL CORPORATION SYSTEM INC.

Street Address (P.O. Box Number is Not Acceptable)

1201 HAYS ST., 105

City

TALLAHASSEE

FL

Zip Code

32301

**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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible

Tax filing requirement and elects to do so.

(See criteria on back)

☒

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Department of State

10. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	<u>C. P. D. T.</u>
NAME	<u>TORRES, CHARLES S.</u>
STREET ADDRESS	<u>P.O. BOX 626 KINGSTON</u>
CITY-ST-ZIP	<u>ROAD TOWN TORTOLA, BVI</u>
TITLE	<u>S. D.</u>
NAME	<u>DEVOS, LLOYD, c/o HILL, BETTIE NASH LLP</u>
STREET ADDRESS	<u>99 PARK AVE., 20TH FLOOR</u>
CITY-ST-ZIP	<u>NEW YORK, NY 10016</u>
TITLE	<u>J. FLYNN</u>
NAME	<u>J. FLYNN</u>
STREET ADDRESS	<u>17084 VILLAGE LANE</u>
CITY-ST-ZIP	<u>DALLAS, TX</u>
TITLE	<u>D.</u>
NAME	<u>JACKSON, JAMES M. c/o GENERAL PALMER HOTEL</u>
STREET ADDRESS	<u>552-A MAIN STREET</u>
CITY-ST-ZIP	<u>ORANGE, CO 81301</u>
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	<u>200005050052--7</u>
CITY-ST-ZIP	<u>-03/06/02--01043--016</u>
TITLE	
NAME	
STREET ADDRESS	<u>****150.00 ****150.00</u>
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	<b>DO NOT WRITE</b>
CITY-ST-ZIP	<b>IN THIS SPACE</b>
TITLE	
NAME	
STREET ADDRESS	<u>J. B. 2/28</u>
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE:

KENT L. TENNENHAUT  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

1/29/2002 (284) 494-2467  
Daytime Phone #

CR2E034B (12/01)