2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P95000022952

1. Entity Name

RUSSELL C. SILVERGLATE, P.A.



FILED Jun 08, 2007 08:00 AN Secretary of State

CR2E034 (11/05)

Principal Place of Business

6451 HOLLANDAIRE DRIVE EAST BOCA RATON, FL 33433 Mailing Address

6451 HOLLANDAIRE DRIVE EAST BOCA RATON, FL 33433



D	O	N	OT	WR	ITE	"IN	THIS	SPACE

4. FEI Number
65-0566945

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SILVERGLATE, RUSSELL C 6451 HOLLANDAIRE DRIVE EAST BOCA RATON, FL 33433

DO NOT WRITE IN THIS SPACE

No Chg-P

06062007

	named entity submits this statement for the pions of registered agent.	ourpose of changing its registere	ed office or registered agent, or b	oth, in the State of Florida I am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and title i	1 applicable (NOTE, Registered	d Agent signature required when reinstating)	DATE
	LE NOW!!! FEE IS \$550.00 ue by September 14, 2007	Election Campaign Finan Trust Fund Contribution.	scing \$5.00 May Be Added to Fees	. ,
10.	OFFICERS AND DIREC	CTORS	*	24
TITLE	DPST	,		
NAME	SILVERGLATE, RUSSELL C			a a complete
STREET ADDRESS	6451 HOLLANDAIRE DRIVE EAST		*:	U00000768051
CITY-SI-ZIP	BOCA RATON, FL 33433			06/08/07-80001-004 150.00
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes 1 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 trusted 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:

STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/6/07 (51) 994.

Daylime Phone # X Z 0 9