

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

FILED
May 02, 2002 8:00 am
Secretary of State

05-02-2002 90059 025 ***150.00

DOCUMENT # **P96000050361**
1. Entity Name
Russell's Well Drilling and Pump Service, Inc.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
8845 Camp Mack Rd
Suite, Apt. #, etc.

3. Mailing Address
8845 Camp Mack Rd
Suite, Apt. #, etc.

- DO NOT WRITE IN THIS SPACE

City & State **Lake Wales FL** City & State **Lake Wales FL** 4. FEI Number **59-3336409** Applied For Not Applicable

Zip **33898** Country **USA** Zip **33898** Country **USA** 5. Certificate of Status Desired **\$8.75 Additional Fee Required**

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent
Name **Russell A. Tullis, Jr.**
Street Address (P.O. Box Number is Not Acceptable)
8845 Camp Mack Rd
City **Lake Wales FL** Zip Code **33898**

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 **Russell A. Tullis Jr.** DATE **4-22-02**
Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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	PD	TITLE	
NAME	Russell Tullis Jr.	NAME	
STREET ADDRESS	8845 Camp Mack Rd	STREET ADDRESS	
CITY-ST-ZIP	Lake Wales FL 33898	CITY-ST-ZIP	
TITLE		TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE		TITLE	
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NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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: **Russell A. Tullis Jr.** DATE **4-22-02**
Signature and typed or printed name of signing officer or director

CR2E034B (12/01)