

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 24, 2002 8:00 am
Secretary of State

02-24-2002 90083 035 ***150.00

DOCUMENT # P97000081334

1. Entity Name
J.G. RUSSELL & CO., INC.

Principal Place of Business

**1756 KESTRAL PARK DR
 SARASOTA FL 34231**

Mailing Address

**1756 KESTRAL PARK DR
 SARASOTA FL 34231**

2. Principal Place of Business
**4564 PEREGRINE PT. CR. N.
 SARASOTA, FL 34231**

3. Mailing Address
4564 PEREGRINE PT. CR. N.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
SARASOTA, FL

City & State
SARASOTA, FL

4. FEI Number
65-0785818

Applied For
☐ Not Applicable

Zip

Country

Zip

Country

34231

USA

34231

USA

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**KIRTLEY, WILLIAM T
 2940 S TAMAMI TR
 SARASOTA FL 34239**

Name

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

City

FL

Zip Code

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)

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2002 Fee will be \$550.00
 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
 NAME **P**
 STREET ADDRESS **RUSSELL, J G**
 CITY-ST-ZIP **1756 KESTRAL PK DR
 SARASOTA FL 34231**

TITLE ☒ Change ☐ Addition
 NAME
 STREET ADDRESS **4564 PEREGRINE PT. CR. N.**
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
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 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 Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **J.G. RUSSELL** 2/4/02 941 941-0007
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/01)