

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Mar 11, 2005 8:00 am**  
**Secretary of State**

03-11-2005 90305 026 \*\*\*150.00

DOCUMENT # P97000081334

1. Entity Name

J.G. RUSSELL & CO., INC.



Principal Place of Business

4864 PEREGRINE PT. CR. N.  
SARASOTA FL 34231

Mailing Address

4864 PEREGRINE PT. CR. N.  
SARASOTA FL 34231

2. Principal Place of Business

4476 CALLE SERENA

Suite, Apt. #, etc.

3. Mailing Address

4476 CALLE SERENA

Suite, Apt. #, etc.

City & State

SARASOTA, FL 34238

Zip

Country

City & State

SARASOTA, FL 34238

Zip

Country

4. FEI Number

65-0785818

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

KIRTLEY, WILLIAM T  
2940 S TAMiami TR  
SARASOTA FL 34239

7. Name and Address of New Registered Agent

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. 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

3/4/05

**FILE NOW!!! FEE IS \$150.00**

**After May 1, 2005 Fee Will Be \$550.00**

**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

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

10. OFFICERS AND DIRECTORS

TITLE P  
NAME RUSSELL, J G  
STREET ADDRESS 4864 PEREGRINE PT. CR. N. 4476 CALLE SERENA  
CITY-ST-ZIP SARASOTA FL 34231 34238

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
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11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PRESIDENT  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

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 an other like empowered.

SIGNATURE: J.G. Russell J.G. RUSSELL

3/4/05

941-941-0057

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #