

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 11, 2003 8:00 am
Secretary of State

08-11-2003 90281 022 ***150.00

DOCUMENT # P98000108059

1. Entity Name
RUSSELL'S IRRIGATION, INC.



Principal Place of Business
1399 SAN LUIS COURT
WINTER SPRINGS FL 32708

Mailing Address
1399 SAN LUIS COURT
WINTER SPRINGS FL 32708

10110878



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-3547758**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MOULD, RUSSELL S
1399 SAN LUIS COURT
WINTER SPRINGS FL 32708

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

FILE NOW!!! FEE IS \$550.00

After September 10, 2003 Fee will be \$750.00

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
NAME **DPST**
STREET ADDRESS **MOULD, RUSSELL S**
CITY-ST-ZIP **121 SABLE COURT**
WINTER SPRINGS FL 32708

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

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 all other like empowered.

SIGNATURE:

Russell S Mould

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (4/03)

Russell's Irrigation Inc.
1399 San Luis Court
Winter Springs, FL 32708
Office: 407-359-2273
Fax: 407-359-0366

Attachment

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10110878

#P98000108059

Sommer Mould

From: "Sommer Mould" <summerf1765@msn.com>
To: <Summerf1765@msn.com>
Sent: Thursday, August 07, 2003 9:15 PM
Subject: Renewal # GOO999047527

To whom it may concern; This was an oversight; I am sending my renewal fee's I apologize for it being late.

Please accept my payment, once again I never received a letter stating it was due. I do have a new address;

Russell's Irrigation

P.O. box 196089

Winter Springs, FL 32719

407-359-2273

Thank You,
Russell Mould

Russell Mould 8-6-03

8/7/2003