

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 14, 2003 8:00 am**  
**Secretary of State**

04-14-2003 90766 023 \*\*\*150.00

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**DOCUMENT # P99000071213**

1. Entity Name

**RUSSELL'S TRANSPORT SERVICE, INC.**



Principal Place of Business  
**1344 NE 1ST STREET  
FORT MYERS FL 33909**

Mailing Address  
**1344 NE 1ST STREET  
FORT MYERS FL 33909**

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2. Principal Place of Business

**2814 SE 8th Ave**

3. Mailing Address

**2814 SE 8th Ave**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

☐ CHECK HERE IF MAKING CHANGES

City & State

**CAPE CORAL FL**

City & State

**CAPE CORAL FL**

4. FEI Number **65-0942121**

Applied For

Not Applicable

Zip

Country

**33904 USA**

Zip

Country

**33904 USA**

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

6. Name and Address of Current Registered Agent

**RUSSELL, DAVID S  
1344 NE 1ST STREET  
FORT MYERS FL 33909**

7. Name and Address of New Registered Agent

Name **Paul Larrow**  
Street Address (P.O. Box Number is Not Acceptable)  
**3501 Del Prado Blvd Suite 312**  
City **CAPE CORAL** FL Zip Code **33904**

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 \$150.00**  
**After May 1, 2003 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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<b>D</b>	<input type="checkbox"/> Delete
NAME	<b>RUSSELL, DAVID S</b>	
STREET ADDRESS	<b>1344 NE 1ST STREET</b>	
CITY-ST-ZIP	<b>FORT MYERS FL 33909</b>	
TITLE	<b>D</b>	<input checked="" type="checkbox"/> Delete
NAME	<b>RUSSELL, KIMBERLY R</b>	
STREET ADDRESS	<b>1344 NE 1ST STREET</b>	
CITY-ST-ZIP	<b>FORT MYERS FL 33909</b>	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
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TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	<b>D, P, T</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>Russell, DAVID S</b>	
STREET ADDRESS	<b>2814 SE 8th Avenue</b>	
CITY-ST-ZIP	<b>CAPE CORAL FL 33904</b>	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	<b>DS</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>Kristin HASTINGS</b>	
STREET ADDRESS	<b>2814 SE 8th Avenue</b>	
CITY-ST-ZIP	<b>CAPE CORAL FL 33904</b>	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
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:**

**SIGNATURE REQUIRED** **DAVID S RUSSELL**

**4-8-03**

**239-772-0334**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)