

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000005171

FILED
Jan 03, 2007
Secretary of State

Entity Name: THE GOLDEN RULE FOUNDATION, INC.

Current Principal Place of Business:

225 S SWOOPE AVE
STE 107
MAITLAND, FL 32751

New Principal Place of Business:

Current Mailing Address:

225 S SWOOPE AVE
STE 107
MAITLAND, FL 32751

New Mailing Address:

FEI Number: 59-3611339 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GALLAGHER, GERALDINE
1332 WEST PRINCETON STREET
ORLANDO, FL 32804 US

Name and Address of New Registered Agent:

WORDEN, CLAY
225 S. SWOOPE AVE.
107
MAITLAND, FL 32751 US

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: CLAY WORDEN

01/03/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PDC () Delete
Name: CONTE, JOE
Address: 225 S SWOOPE AVE STE 107
City-St-Zip: MAITLAND, FL 32751

Title: SD () Delete
Name: WHEELER, KEN
Address: 225 S SWOOPE AVE STE 107
City-St-Zip: MAITLAND, FL 32751

Title: TD () Delete
Name: GALLAGHER, GERALDINE
Address: 225 S SWOOPE AVE STE 107
City-St-Zip: MAITLAND, FL 32751

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SD (X) Change () Addition
Name: BROWN, MYRON
Address: 225 S SWOOPE AVE STE 107
City-St-Zip: MAITLAND, FL 32751

Title: TD (X) Change () Addition
Name: WORDEN, CLAY
Address: 225 S SWOOPE AVE STE 107
City-St-Zip: MAITLAND, FL 32751

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOE CONTE

PDC

01/03/2007

Electronic Signature of Signing Officer or Director

Date