

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N99000005171

FILED  
May 19, 2003  
Secretary of State

Entity Name: THE GOLDEN RULE FOUNDATION, INC.

**Current Principal Place of Business:**

867 CRANES COURT  
SUITE A  
MAITLAND, FL 32751

**New Principal Place of Business:**

**Current Mailing Address:**

867 CRANES COURT  
SUITE A  
MAITLAND, FL 32751

**New Mailing Address:**

FEI Number: 59-3611339

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

HAMMAN, RACHEL  
867 CRANES COURT  
SUITE A  
MAITLAND, FL 32751 US

**Name and Address of New Registered Agent:**

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:

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PDC ( ) Delete  
Name: HAMMAN, RACHEL  
Address: 867 CRANES CT, SUITE A  
City-St-Zip: MAITLAND, FL 32751

Title: SD ( ) Delete  
Name: WRIGHT, MICHAEL  
Address: 867 CRANES COURT SUITE A  
City-St-Zip: MAITLAND, FL 32751

Title: TD ( ) Delete  
Name: HAMMON, BRAD  
Address: 867 CRANES CT, SUITE A  
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: WHEELER, KEN  
Address: 867 CRANES COURT SUITE A  
City-St-Zip: MAITLAND, FL 32751

Title: TD (X) Change ( ) Addition  
Name: SUITS, SCOTT  
Address: 867 CRANES CT, SUITE A  
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 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 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: RACHEL HAMMAN

PDC

05/19/2003

Electronic Signature of Signing Officer or Director

Date