2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000005171

Entity Name: THE GOLDEN RULE FOUNDATION, INC.

Current Principal Place of Business:

777 BENNETT DRIVE LONGWOOD. FL 32750

Current Mailing Address:

PO BOX 940866

MAITLAND, FL 32794 US

FEI Number: 59-3611339 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

MOORE, BENJAMIN HCPA 720 N. MAITLAND AVE. SUITE 105

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:

Electronic Signature of Registered Agent

Date

FILED Mar 21, 2013

Secretary of State

CC2699635829

Officer/Director Detail:

Title DIR. Title DIR.

NameDRESSLER, SHERI CHAIRNameCAMPBELL, JOHN MAddress1735 FOX GLEN CT.Address5691 POND PINE COURT

City-State-Zip: WINTER SPRINGS FL 32708 City-State-Zip: OVIEDO FL 32765

Title S/T Title EDIR

 Name
 CAMPBELL, JOHN
 Name
 VALES, HENRY FSR

 Address
 5691 POND PINE COURT
 Address
 PO BOX 940866

City-State-Zip: OVIEDO FL 32765 City-State-Zip: MAITLAND FL 32751

Title DIR Title DIR

Name SHERI D, RESSLER Name CHUCK, WILDER ESQ.

Address PO BOX 940866 Address PO BOX 940866

City-State-Zip: MAITLAND FL 32794 City-State-Zip: MAITLAND FL 32794

Title DIRECTOR IMMEDIATE PAST CHAIR

Name CONTE. JOSEPH D

Address C/O CONSULATE HEALTHCARE

800 N. CONCOURSE PARKWAY SUITE

800

City-State-Zip: MAITLAND FL 32751

I hereby 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 all other like empowered.

SIGNATURE: HENRY F. VALES EXECUTIVE DIR. 03/21/2013

Electronic Signature of Signing Officer/Director Detail

Date