## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F93000003904

Entity Name: THE RUTH COMPANY

FILED Mar 31, 2004 Secretary of State

	mer meno	711			
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
2365 HARBODSBURG RD. LEXINGTON, KY 40505			SUITE B-210	2365 HARBODSBURG RD. SUITE B-210 LEXINGTON, KY 40504	
Current Mailing Address:			New Mailing Address:		
PO BOX 9 LEXINGTO	11068 DN, KY 40591	1068 US			
FEI Number	: 61-1159499	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address	Name and Address of New Registered Agent:	
1200 SOU	PORATION SY TH PINE ISLA ION, FL 33324	ND ROAD			
	e named entity e of Florida.	submits this statement for the p	purpose of changing its registere	ed office or registered agent, or both,	
SIGNATUI	RE:				
Electronic Signature of Registered Agent			ent	Date	
Election Ca	mpaign Financin	g Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	CP ( RUTH, LEONAI 2049 LAKESID LEXINGTON, K	E DRIVE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D ( RUTH, RICK 840 W. MAIN S MOREHEAD, K		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	ST ( RUTH, DARBY 1128 TANBARI LEXINGTON, K	( DRIVE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name:	VCVP ( JACKIE, RUTH	) Delete	Title: Name:	( ) Change ( ) Addition	

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Address:

City-St-Zip:

SIGNATURE: LEONARD T. RUTH PRES 03/31/2004

2365 HARRODSBURG RD, SUITE B-210

LEXINGTON, KY 40504

Address:

City-St-Zip: