2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F95000005641

FILED Feb 27, 2008 Secretary of State

Entity Name: THE RUTHERFORD INSTITUTE INC.

		TIERR GREEN WOTT GTE, ING.			
Current Principal Place of Business:			New Principal Place of Business:		
	HEM PLACE TESVILLE, VA	. 22901 US			
Current Mailing Address:			New Mailing Address:		
P.O. BOX CHARLOT	7482 TESVILLE, VA	. 229067482			
FEI Number:	: 52-1267484	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of C	urrent Registered Agent:	Name and Address o	f New Registered Agent:	
1201 HAYS TALLAHAS The above	ATION SERVIC S STREET SSEE, FL 3230 named entity se of Florida.	012525 US	ourpose of changing its registered	d office or registered agent, or both,	
SIGNATUF	RE:				
	Electron	ic Signature of Registered Age	ent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR	
Title: Name: Address: City-St-Zip:	WHITEHEAD, J 7373 CRIPPLE	CREEK RD.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	NEUBERGER,	/ENTH STREET, #302	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP () MASTERS, MIC 540 HOSPITAL CLYDE, NC 28	DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	NEUBERGER,	/ENTH STREET, #302	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D (X) WILLSON, FRE 1449 CHASE L/ EL CAJON, CA	NE	Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify 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: JOHN W WHITEHEAD PRES 02/27/2008