

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000002584

FILED  
Apr 11, 2007  
Secretary of State

**Entity Name:** THE HOUSE OF RUTH RESTORATION CENTER, INC.

**Current Principal Place of Business:**

1289 WEST 35TH STREET  
RIVIERA BEACH, FL 33404

**New Principal Place of Business:**

**Current Mailing Address:**

1289 WEST 35TH STREET  
RIVIERA BEACH, FL 33404

**New Mailing Address:**

**FEI Number:**                      **FEI Number Applied For ( )**                      **FEI Number Not Applicable (X)**                      **Certificate of Status Desired ( )**

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

LINDSEY, LONIE M  
1289 WEST 35TH STREET  
RIVIERA BEACH, FL 33404      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: ED                      ( ) Delete  
Name: LINDSEY, LONIE M  
Address: 1289 WEST 35TH STREET  
City-St-Zip: RIVIERA BEACH, FL 33404

Title: PD                      ( ) Delete  
Name: JONES, ANDREW J  
Address: 1289 WEST 35TH STREET  
City-St-Zip: RIVIERA BEACH, FL 33404

Title: D                      ( ) Delete  
Name: RAWLS, BETTY  
Address: 811 ISLAND SHORES DRIVE  
City-St-Zip: GREENACRES, FL 33413

Title: T                      ( ) Delete  
Name: HARDNETT, ANGRINETTE B  
Address: 2135 WARE  
City-St-Zip: WEST PALM BEACH, FL 33409

Title: S                      ( ) Delete  
Name: WESTERMAN, YVONNE  
Address: 4377 JUNIPER TERRACE  
City-St-Zip: BOYNTON BEACH, FL 33435

Title: CD                      ( ) Delete  
Name: BURGESS, MWALIMU, DAVID R DR  
Address: 992 COURSE RIDGE DRIVE  
City-St-Zip: LITHONIA, GA 30058

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

Title: D                      (X) Change ( ) Addition  
Name: JONES, MARQUIS  
Address: 4141 NW 26 STREET APT 115  
City-St-Zip: LAUDERHILL, FL 33313

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

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

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

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: LONIE L. LINDSEY

ED

04/11/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date