2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000003938

FILED Mar 12, 2007 Secretary of State

Entity Nan	ne: RUSKIN	INCORPORATION COMMITT	EE, INC.		
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
P O BOX 1111 RUSKIN, FL 337571111		1426 DEIRDRE DRIVI RUSKIN, FL 337570	E		
Current M	ailing Addre	ss:	New Mailing Addres	New Mailing Address:	
P O BOX 1 RUSKIN, F	111 L 337571111				
FEI Number:		FEI Number Applied For ()	FEI Number Not Applicable (X)	Certificate of Status Desired ()	
Name and	Address of	Current Registered Agent:	Name and Address of	Name and Address of New Registered Agent:	
	KATHLEEN				
The above	L 335704101		purpose of changing its registere	d office or registered agent, or both,	
RUSKIN, F The above in the State	named entity of Florida		purpose of changing its registere	d office or registered agent, or both,	
RUSKIN, F The above	named entity of Florida.			d office or registered agent, or both,	
RUSKIN, F The above in the State SIGNATUF	named entity of Florida.	submits this statement for the particles of Registered Ag	ent		
RUSKIN, F The above in the State SIGNATUF	named entity of Florida. RE: Electro	submits this statement for the price Signature of Registered Agentors:) Delete E E DR	ent	Date	
RUSKIN, F The above in the State SIGNATUF OFFICERS Title: Name: Address:	named entity of Florida. RE: Electro S AND DIRECTOR PD (CLARK, WADI 1426 DEIRDR RUSKIN, FL 3	submits this statement for the price of Registered Agenta CTORS:) Delete E E E E D R :35704101) Delete ELLA	ent ADDITIONS/CHANG Title: Name: Address:	Date ES TO OFFICERS AND DIRECTORS:	

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: LEWIS W. CLARK PD 03/12/2007