## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N08000010429

Apr 17, 2009 Secretary of State

Entity Name: RUBY HOLLAND FOUNDATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 2053 PALM VISTA DRIVE APOPKA, FL 32712 **Current Mailing Address: New Mailing Address:** 2053 PALM VISTA DRIVE APOPKA, FL 32712 FEI Number: 26-0529912 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: FULLINGTON, ELIZABETH 2053 PALM VISTA DRIVE APOPKA, FL 32712 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete ( ) Change (X) Addition FULLINGTON, ELIZABETH Name: Name: Address: Address: 2053 PALM VISTA DRIVE City-St-Zip: City-St-Zip: APOPKA, FL 32712 Title: Title: ( ) Change (X) Addition ( ) Delete Name: Name: HOLLAND, LORIS Address: Address: 5306 FAIRVIEW TERRACE ROAD City-St-Zip: City-St-Zip: WEST NY, NJ 07093 Title: () Delete Title: **VPD** ( ) Change (X) Addition PATRONG, ALICE Name: Name: 25 OLYMPUS DRIVE Address: Address: City-St-Zip: City-St-Zip: RICHMOND HILL, TO CANADA Title: () Delete Title: VPD ( ) Change (X) Addition Name: Name: ORNEVIK, ABIGAIL Address: Address: 224 MILLS DRIVE City-St-Zip: City-St-Zip: FORT MILL, SC 29708 Title: () Delete Title: ( ) Change (X) Addition FRANCIS, ALANA Name: Name: 2053 PALM VISTA DRIVE Address: Address: City-St-Zip: City-St-Zip: APOPKA, FL 32712

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: ELIZABETH FULLINGTON Ρ 04/17/2009