

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N09000002196

**FILED**  
**Apr 28, 2010**  
**Secretary of State**

**Entity Name:** RIPPLE EFFECT, INC.

**Current Principal Place of Business:**

144 FIRST AVENUE  
GROVELAND, FL 34736

**New Principal Place of Business:**

**Current Mailing Address:**

144 FIRST AVENUE  
GROVELAND, FL 34736

**New Mailing Address:**

**FEI Number:** 80-0369165

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WARE, THOMAS JR  
144 FIRST AVENUE  
GROVELAND, FL 34736 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:** P  
**Name:** WARE, THOMAS JR.  
**Address:** 144 FIRST AVE  
**City-St-Zip:** GROVELAND, FL 34736

**Title:** VP  
**Name:** WARE, TIFFANY  
**Address:** 5 HEMLOCK CT.  
**City-St-Zip:** OCALA, FL 34472

**Title:** OFF  
**Name:** MALDONADO, LUCRETIA  
**Address:** 144 FIRST AVE  
**City-St-Zip:** GROVELAND, FL 34736

I hereby 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 all other like empowered.

**SIGNATURE:** TIFFANY WARE

VP

04/28/2010

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

\_\_\_\_\_  
Date