2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000082464

Entity Name: RUTH ASSOCIATES, INC.

FILED Jan 19, 2009 Secretary of State

Current Principa	al Place of Business:	New Principal Place of Business:

513 W. VINE ST 13538 VILLAGE PARK DR. KISSIMMEE, FL 34741

SUITE # 165

ORLANDO, FL 32837

Current Mailing Address: New Mailing Address:

13538 VILLAGE PARK DR. 14006 ISLAMORADA DRIVE

ORLANDO, FL 32837 **SUITE # 165**

ORLANDO, FL 32837

FEI Number: 59-3740280 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

MORALES, JULIO M MORALES, JULIO M 13538 VILLAGE PARK DR. 513 W. VINE ST KISSIMMEE, FL 34741 US SUITE # 165

ORLANDO, FL 32837 US

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: JULIO M. MORALES 01/19/2009

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Name:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition

MORALES, JULIO M MORALES, JULIO M Name: Name:

513 W. VINE ST 13538 VILLAGE PARK DR. SUITE # 165 Address: Address:

City-St-Zip: KISSIMMEE, FL 34741 City-St-Zip: ORLANDO, FL 32837

Title: Title: () Delete (X) Change () Addition MORALES, RUTH N Name: MORALES, RUTH N

Name:

513 W. VINE ST 13538 VILLAGE PARK DR. SUITE # 165 Address: Address: ORLANDO, FL 32837

KISSSIMMEE, FL 34741 City-St-Zip: City-St-Zip:

() Delete Title: (X) Change () Addition Title: MORALES, VANESA N MORALES, VANESA N Name: Name:

513 W. VINE ST 13538 VILLAGE PARK DR. SUITE # 165 Address: Address:

City-St-Zip: KISSIMMEE, FL 34741 City-St-Zip: ORLANDO, FL 32837

Title: () Delete Title: () Change (X) Addition

MORALES, JULIO M SR Name:

Address: Address: 13538 VILLAGE PARK DR. SUITE # 165

City-St-Zip: City-St-Zip: ORLANDO, FL 32837

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Ρ SIGNATURE: JULIO M. MORALES 01/19/2009