2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P04000139091 1. Entity Name GOLDEN RULE REALTY INTERNATIONAL, INC.



Principal Place of Business

1001 N. WASHINGTON BLVD.

SUITE 101

SARASOTA, FL 34236

Mailing Address

1001 N. WASHINGTON BLVD.

SUITE 101

SARASOTA, FL 34236

FILED Jul 05, 2007 08:00 AM Secretary of State



DO NOT WRITE IN THIS SPACE

07022007 No Chg-P CR2E034 (11/05)

 4. FEI Number
 Applied For

 20-1733085
 Not Applicable

5. Certificate of Status Desired

\$8.75 Additional

6. Name and Address of Current Registered Agent

BISHOP, HUGH B 1001 N. WASHINGTON BLVD. SUITE 101 SARASOTA, FL 34236

g of margin	4 451.11	7,4	*******	· 作"我"	光 森 群 第二年
	\frown	NI/) T		
<i>(9</i>	(3) Ziji	NU	9	VVK	ITE
5 = 1	T 1		11 1		
推销1. 4	₩., I.,	1 6	r Ca. a	요 끝, 약류.	an i dan
1 8 TEN		' '		```	
255	1 4			124	CE
Ji∙ z ■ m	4 1. •				

			habababan					
8. 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. I am familiar with, and accept the obligations of registered agent.								
SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE								
1 (22 1/4 11111 1 22 12 4 122122		Election Campaign Finant Trust Fund Contribution	cing \$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(corporation did not receive the pri	b), F.S., the or notice.			
10.	OFFICERS AND DIRECTORS		14.40.40.40.46.46.46.46	CONTRACTOR WAS ALSO	Mark Park			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BISHOP, HUGH B 1001 N. WASHINGTON BLVD. #101 SARASOTA, FL 34236							
TITLE NAME STREET ADDRESS CITY-ST-ZIP					15 150.00			
TITLE NAME STREET ADDRESS CITY+ST-ZIP			D.	D NOT WRITE				
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN	THIS SPACE				
TITLE				ennet sampe i tres e ditat i relace di icie i	伊爾達尼亞國民國			

12. Thereby certify that the information supplied with this filling togs not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental copon is true and accurate and that my 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 of traffice empowered to execute this report as required by Chapter 607. Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment of addiess, with all object the empowered.

SIGNATURE:

NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

July 2, 2007 941-366-2779