

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P97000102386

Entity Name: RUTHVEN GP ONE, INC.

**FILED**  
**Apr 06, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

41 LAKE MORTON DRIVE  
LAKELAND, FL 33801

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 2420  
LAKELAND, FL 33806

**New Mailing Address:**

FEI Number: 59-3481804

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

THE RUTHVENS, INC  
41 LAKE MORTON DRIVE  
LAKELAND, FL 33801 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: STPD  
Name: RUTHVEN, JOE P  
Address: 41 LAKE MORTON DRIVE  
City-St-Zip: LAKELAND, FL 33801

Title: D  
Name: RUTHVEN, JAMES G  
Address: 41 LAKE MORTON DR.  
City-St-Zip: LAKELAND, FL 33801

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

SIGNATURE: JOE P RUTHVEN

STPD

04/06/2011

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

\_\_\_\_\_  
Date