


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 12, 2004 08:00 AM
Secretary of State

DOCUMENT # P98000019717

1. Entity Name
RON HARRY & SONS INC.



Principal Place of Business Mailing Address

1014 SW ESTAUGH AVE. 1014 SW ESTAUGH AVE.
 PORT ST. LUCIE, FL 34953 PORT ST. LUCIE, FL 34953

DO NOT WRITE IN THIS SPACE



04062004 No Chg-P CR2E034 (10/03)

4. FEI Number Applied For
 65-0828380 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HARRY, RONALD L
 1014 SW ESTAUGH AVE.
 PORT ST. LUCIE, FL 34953

DO NOT WRITE IN THIS SPACE

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: *Margaret A. Harry*
Signatures and typed name of registered agent and file if applicable (NOTE: Registered Agent signature required when renewing) DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

000000108572
 04/12/04-80008-022 150.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP HARRY, MARGARET A 1014 SW ESTAUGH AVE. PORT ST. LUCIE, FL 34953
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P HARRY, RONALD L 1014 SW ESTAUGH AVE. PORT ST. LUCIE, FL 34953
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST HARRY, ROBERT L 1014 SW ESTAUGH AVE. PORT ST. LUCIE, FL 34953
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report 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 or trustee 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 with an address, with all other like empowered.

SIGNATURE: *Margaret A. Harry* 4-6-04
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #