2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 18, 2005 8:00 am Secretary of State

DOCUMENT # P9900004286 1. Entity Name RON JON HOLDINGS MANAGEMENT, INC.				04-18-2005 90563 038 ***158.75
Principal Place of Business 3850 S. BANANA RIVER BLVD. COCOA BEACH, FL 32931		Mailing Address 3850 S. BANANA RIVER BLVD, COCOA BEACH, FL 32931		20036213
2. Principal P	face of Business	3. Mailing Address		
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	101	03152005 Chg-P CR2E034 (10/03)
City & Stat	е	City & State		4. FEI Number Applied For 59-3563674 Not Applicable
- Zip	Country —		Country -	5. Certificate of Status Desired \$8.75 Additional Fee Required
	6. Name and Address of Current	Registered Agent	Name	7. Name and Address of New Registered Agent .
PLANTE, KELLY B 225 S ADAMS STREET				ss (P.O. Box Number is Not Acceptable)
SUITE 250 TALLAHASSEE, FL 32302-3189			1	
		City	FL Zip Code	
8. The above the obligate SIGNATURE	named entity submits this statement folions of registered agent.		gistered office or regi	stered agent, or both, in the State of Florida. I am familiar with, and accept ured when reinstating) DATE
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees				
10.	OFFICERS AND		11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
NAME STREET ADDRESS CITY-ST-ZIP	D DIMENNA, RONALD E 3850 S. BANANA RIVER BLVD. COCOA BEACH, FL 32931	Delete	STREET ADDRESS 39	25CHENBAUM, MALLOLM R. Change Maddition 250. S. BANANA RUER BLUD.
TITLE	D	D Notes		50.1011
NAME STREET ADDRESS	MORIARTY, EDWARD L 3850 S. BANANA RIVER BLVD.	☐ Delete	NAME STREET ADDRESS	WASOS. BANANA RIVER BLVD.
CITY-ST-ZIP	COCOA BEACH, FL 32931		CITY-ST-ZIP	DOOR BEACH FL 32931
NAME STREET ADDRESS CITY-ST-ZIP	an an ann an an ann an an an an an an an	Delete —	NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delite	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS		☐ Delete	TITLE NAME STREET ADDRESS	☐ Change ☐ Addition
CITY-ST-ZIP	<u> </u>		CITY-ST-ZIP	

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: Place I - Maria Designature of Director