## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 398862** 

Entity Name: RON T. ENTERPRISES, INC.

FILED Jul 07, 2005 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

990 LOPESTAR DR. 990 LODESTAR DR

TARON SPRINGS, FL 34690 TARPON SPRINGS, FL 34690

**Current Mailing Address: New Mailing Address:** 

990 LOPESTAR DR. 990 LODESTAR DR

TARPON SPRINGS, FL 34690 TARON SPRINGS, FL 34690

FEI Number: 59-1390012 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

TICHENOR, RONALD S TICHENOR, RONALD S 990 LODESTAR DRIVE 20 FRESHWATER DR

PALM HARBOR, FL 34684 US TARPON SPRINGS, FL 34690 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: RONALD STICHENOR 07/07/2005

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title: (X) Change ( ) Addition

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete TICHENOR, RONALD S, TICHENOR, RONALD S, Name: Name: 990 LODESTAR DR. 990 LODESTAR DR. Address: Address:

TARON SPRINGS, FL 34690 City-St-Zip: City-St-Zip: TARPON SPRINGS, FL 34690

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

TICHENOR, RONALD G., TICHENOR, RONALD G., Name: 20 FRESHWATER DR Address: 990 LODESTAR DRIVE Address: PALM HARBOR, FL TARPON SPRINGS, FL 34690 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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.

SIGNATURE: RONALD STICHENOR PD 07/07/2005