

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 16, 2006 8:00 am
Secretary of State

03-16-2006 90226 018 ***158.75

DOCUMENT # 689943

1. Entity Name
RON JON'S AUTOMOTIVE, INC.



Principal Place of Business
**C/O JOHN D RUNNER, SR
4854 SOUTH ORANGE AVENUE
ORLANDO, FL 32806**

Mailing Address
**C/O JOHN D RUNNER, SR
4854 SOUTH ORANGE AVENUE
ORLANDO, FL 32806**

50003108



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

02082006 Chg-P CR2E034 (11/05)

City & State

City & State

4. FEI Number
59-2032302

Applied For
Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**RUNNER SR, JOHN D
4854 S ORANGE AVE
ORLANDO, FL 32806**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**PSD
RUNNER, JOHN D., SR.
6850 SOUTH FORK RANCH RD
CLERMONT, FL 34711** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
Clermont, FL 34714 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**VTD
RUNNER, RENA W
6850 SOUTH FORK RANCH RD.
CLERMONT, FL 34711** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
Clermont, FL 34714 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP ☐ Change ☐ Addition

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CITY - ST - ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

March 14, 2006

Date

Daytime Phone #

407-855-6386

Rena W. Runner