

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J07974

FILED
Jan 28, 2008
Secretary of State

Entity Name: RON'S ALUMINUM SERVICE, INC.

Current Principal Place of Business:

5921 SE 68TH STREET
105
OCALA, FL 34472

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1957
OCALA, FL 34478

New Mailing Address:

FEI Number: 59-2653429

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ANDERSON, PATRICIA F.
7169 HEMLOCK LOOP
OCALA, FL 34472 US

Name and Address of New Registered Agent:

ANDERSON, PATRICIA F.
11 HEMLOCK WAY
OCALA, FL 34472 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:

01/28/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: ANDERSON, RONALD J.,
Address: 7169 HEMLOCK LOOP
City-St-Zip: OCALA, FL 34472

Title: DST () Delete
Name: ANDERSON, PATRICIA F.,
Address: 7169 HEMLOCK LOOP
City-St-Zip: OCALA, FL 34472

Title: VP () Delete
Name: HILLYGUS, ANGELLE N
Address: 8 TEAK COURT
City-St-Zip: OCALA, FL 34472

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: ANDERSON, RONALD J.,
Address: 11 HEMLOCK WAY
City-St-Zip: OCALA, FL 34472

Title: DST (X) Change () Addition
Name: ANDERSON, PATRICIA F.,
Address: 11 HEMLOCK WAY
City-St-Zip: OCALA, FL 34472

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: PATRICIA F. ANDERSON

RA

01/28/2008

Electronic Signature of Signing Officer or Director

Date