

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

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Apr 29 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # M65491 (6)
1. Corporation Name
RONJOY, INC.



Principal Place of Business
8006 N GOLFVIEW DRIVE
PLANT CITY FL 33567

Mailing Address
2006 N GOLFVIEW DRIVE
PLANT CITY FL 33567-6767

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 01/22/1988		3a. Date of Last Report 04/22/1996	
21	5061 GREYLOCK CT.	26	5061 GREYLOCK CT.	4. FEI Number 65-0019760		Applied For Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
22		27		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
City & State SANFORD FL		City & State SANFORD FL		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
23	Zip 32771	28	Country U.S.A.	29		30	
Country U.S.A.		Country U.S.A.					

9. Name and Address of Current Registered Agent SMITH, RONALD J. 2006 N. GOLFVIEW PLANT CITY FL 33567				10. Name and Address of New Registered Agent			
81. Name				82. Street Address (P.O. Box Number is Not Acceptable) 5061 GREYLOCK CT.			
83.				84. City SANFORD			
				85. Zip Code FL 32771			

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	D	<input type="checkbox"/> DELETE		1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	SMITH, RONALD J.			1.2 NAME			
STREET ADDRESS	2006 N GOLFVIEW			1.3 STREET ADDRESS	5061 GREYLOCK CT.		
CITY-ST-ZIP	PLANT CITY FL			1.4 CITY-ST-ZIP	SANFORD FL 32771		
TITLE	D	<input type="checkbox"/> DELETE		2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	SMITH, JOYCE			2.2 NAME			
STREET ADDRESS	2006 N GOLFVIEW			2.3 STREET ADDRESS	5061 GREYLOCK CT.		
CITY-ST-ZIP	PLANT CITY FL			2.4 CITY-ST-ZIP	SANFORD FL 32771		
TITLE		<input type="checkbox"/> DELETE		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME				3.2 NAME			
STREET ADDRESS				3.3 STREET ADDRESS			
CITY-ST-ZIP				3.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME				4.2 NAME			
STREET ADDRESS				4.3 STREET ADDRESS			
CITY-ST-ZIP				4.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME				5.2 NAME			
STREET ADDRESS				5.3 STREET ADDRESS			
CITY-ST-ZIP				5.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME				6.2 NAME			
STREET ADDRESS				6.3 STREET ADDRESS			
CITY-ST-ZIP				6.4 CITY-ST-ZIP			

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE
Joyce M Smith - Joyce M Smith 4/29/97 407-302-0447

CR2E034 (9/96)