## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# M68681

Entity Name: RON FEE INC.

FILED Feb 24, 2006 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 306 BEVERLY COURT SPRING HILL, FL 34606 **Current Mailing Address: New Mailing Address:** 306 BEVERLY COURT SPRING HILL, FL 34606 US FEI Number: 59-2873600 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: FEE, RONALD J. 266 GULF PORT LANE SPRING HILL, FL 34608 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: **PCFO** () Delete () Change () Addition FEE, RONALD J., Name: Name: 266 GULFPORT LANE Address: Address: City-St-Zip: SPRING HILL, FL 34608 US City-St-Zip: Title: SVP Title: () Delete () Change () Addition FEE, RONALD J. JR., Name: Name: 8249 STEWARD CT Address: Address: SPRING HILL, FL 34608 US City-St-Zip: City-St-Zip: Title: Title: ( ) Delete () Change () Addition FEE, DEBRA L., Name: Name: 8249 STEWARD CT Address: Address: City-St-Zip: SPRING HILL, FL 34608 US City-St-Zip: Title: () Delete Title: () Change () Addition FEE, GRACE C., Name: Name: Address: 266 GULFPORT LANE Address: City-St-Zip: SPRING HILL, FL 34608 US City-St-Zip: Title: Title: () Delete () Change () Addition BUNNELL, EDWARD J, Name: Name: 2327 LAREDO AVE Address: Address: City-St-Zip: SPRING HILL, FL 34608 US City-St-Zip: Title: () Delete Title: () Change () Addition Name: TRIOLA, EILEEN M Name: Address: 8207 AQUILA STREET Address: City-St-Zip: City-St-Zip: PORT RICHEY, FL 34668

I hereby certify that the information supplied with this filing does not qualify for the 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: EILEEN M. TRIOLA EVP 02/24/2006