## **2008 FOR PROFIT CORPORATION ANNUAL REPORT**

## May 05, 2008 8:00 am Secretary of State DOCUMENT # P05000146251 05-05-2008 90234 017 \*\*\*158.75 RON JON ARUBA, INC. Principal Place of Business Mailing Address 40096260 3850 S BANANA RIVER BLVD 3850 S BANANA RIVER BLVD COCOA BEACH, FL 32931 COCOA BEACH, FL 32931 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04252008 Chg-P CR2E034 (12/06) City & State City & State 4. FEI Number Applied For 20-3713951 Not Applicable Zip Country ZiΩ Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent SPECHT, LISA A Street Address (P.O. Box Number is Not Acceptable) GRAYROBINSON, P.A. 301 E PINE ST - STE 1400 ORLANDO, FL 32801 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 \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. D.P TITI F TITLE Change ☐ Addition □ Delete NAME MORIARTY, EDWARD L NAME MORIARTY, EDWARD 3850 SBANANA RIVER BLUD STREET ADDRESS 3850 S BANANA RIVER BLVD STREET ADDRESS COCOA BEACH, FL 32931 CITY-ST-ZIP CITY-ST-ZIP COCOA BEACH FL 32931 ☐ Delete TITLE Change Addition TITLE NAME KIRSCHENBAUM, MALCOLM R NAME HARVEY, DEBRA A-3150 SZANANA RIVER BLUD STREET ADDRESS 3850 S BANANA RIVER BLVD STREET ADDRESS COCOA BEACH, FL 32931 CITY-ST-ZIP CITY - ST - ZIP COCOA BEACH FL 3293 ☐ Delete TITLE Change ☐ Addition TITLE YOUNGS, JACQUELINE NAME NAME 3850 S BÄNANA RIVER BLVD STREET ADDRESS STREET ADDRESS CITY-ST-7IP COCOA BEACH, FL 32931 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Defete TITI F ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP I hereby certify that the information supplies with this filling 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 of the receiver or trustee employered to execute his report as required by Chapter 607. Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on ary stagen required with a place rest with all other like impowered. 4/30/08

E OF SIGNING OFFICER OR D

**FILED**