2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 23, 2009
Secretary of State

DOCUMENT# P95000001283

Entity Name: ALRON ENTERPRISES, INC.

Current Principal Place of Business:

3990 MINTON RD.
MELBOURNE, FL 32904 US

New Principal Place of Business:

Current Mailing Address:

3990 MINTON RD.
MELBOURNE, FL 32904 US

New Mailing Address:

FEI Number: 59-3292277 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GALLAGHER, RONALD
3990 MINTON RD.
MELBOURNE, FL 32904 US

Name and Address of New Registered Agent:

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:

Title: CFOP ( ) Delete
Name: GALLAGHER, RONALD
Address: 3990 MINTON RD.
City-St-Zip: MELBOURNE, FL 32904

Title: T ( ) Delete
Name: LEACH, MICHELLE
Address: 101 HAWTHORNE STREET
City-St-Zip: PALM BAY, FL 32907

Title: SD ( ) Delete
Name: GALLAGHER, PATRICIA
Address: 3990 MINTON ROAD
City-St-Zip: MELBOURNE, FL 32904

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition
Name: GALLAGHER, RONALD
Address: 3990 MINTON RD.
City-St-Zip: MELBOURNE, FL 32904

Title: TD (X) Change ( ) Addition
Name: LEACH, MICHELLE
Address: 1171 ROSA AVE
City-St-Zip: PALM BAY, FL 32909

Title: SD (X) Change ( ) Addition
Name: GALLAGHER, PATRICIA
Address: 1690 LARA ST NE
City-St-Zip: PALM BAY, FL 32907

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: RONALD GALLAGHER DP 01/23/2009

Electronic Signature of Signing Officer or Director Date