2008 FOR PROFIT CORPORATION **ANNUAL REPORT**

May 05, 2008 8:00 am Secretary of State DOCUMENT # P99000004286 05-05-2008 90234 019 ***158.75 1. Entity Name RON JON HOLDINGS MANAGEMENT, INC. Principal Place of Business Mailing Address 400000 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. CR2E034 (12/06) 04252008 Chg-P City & State City & State 4. FEI Number Applied For 59-3563674 Not Applicable Zip Zip Country 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 PLANTE, KELLY B Street Address (P.O. Box Number is Not Acceptable) 225 S ADAMS STREET **SUITE 250** TALLAHASSEE, FL 32302-3189 Zip Code City 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. DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution Added to Fees After May 1, 2008 Fee will be \$550.00 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. OFFICERS AND DIRECTORS Change Addition TITLE ☐ Delete TITLE MOKIARTY, EDWARD L MORIARTY, EDWARD L NAME NAME 3850 S. BALANA RIVER BLVD STREET ADDRESS 3850 S. BANANA RIVER BLVD. STREET ADDRESS CITY-ST-ZIP COCOA BEACH, FL 32931 CITY-ST-ZIP COCOA BEACH, FL 32931 Delete ☐ Change Addition TITLE TITLE DIMENNA, RONALD E NAME HARVEY, DEBRA A 3850 S. BANANA RIVER BLUD NAME 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 YOUNGS, JACQUELINE G NAME NAME 3850 S BANANA RIVE BLVD STREET ADDRESS STREET ADDRESS CITY-ST-ZII COCOA BEACH, FL 32931 CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET AODRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I nereby certify that the information supplied 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 suppliemental 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 processor of the corporation or the processor of the corporation or the processor of the corporation of the corporation of the processor of the processor of the corporation of the processor of the processor

Debra A Harveu

GNING OFFICER OR DIRECTOR

SIGNATURE

URE AND TYPED OR PRINTED NAME

4/30/08

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