

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000005233

FILED  
Apr 15, 2008  
Secretary of State

Entity Name: POND & COMPANY CORPORATION

**Current Principal Place of Business:**

3500 PARKWAY LANE  
SUITE 600  
NORCROSS, GA 30092

**New Principal Place of Business:**

**Current Mailing Address:**

3500 PARKWAY LANE  
SUITE 600  
NORCROSS, GA 30092

**New Mailing Address:**

FEI Number: 58-1639128      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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: CP ( ) Delete  
Name: POND, J. AL  
Address: 3500 PARKWAY LANE, SUITE 600  
City-St-Zip: NORCROSS, GA 30092

Title: VD ( ) Delete  
Name: FUMBANKS, JOHN F  
Address: 3500 PARKWAY LANE, SUITE 600  
City-St-Zip: NORCROSS, GA 30092

Title: DV ( ) Delete  
Name: PARKER, ANTHONY W  
Address: 3500 PARKWAY LANE, SUITE 600  
City-St-Zip: NORCROSS, GA 30092

Title: VM ( ) Delete  
Name: RICHARDS, ROSEANNA D  
Address: 3500 PARKWAY LANE, SUITE 600  
City-St-Zip: NORCROSS, GA 30092

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VM (X) Change ( ) Addition  
Name: MEIER, JEFFERY W  
Address: 3500 PARKWAY LANE, SUITE 600  
City-St-Zip: NORCROSS, GA 30092

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: J. AL POND

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

CP

04/15/2008

\_\_\_\_\_ Date