

2008 FOR PROFIT CORPORATION
ANNUAL REPORT

FILED
Aug 21, 2008 8:00 am
Secretary of State

08-21-2008 90001 040 ***550.00

DOCUMENT # P07000096484

1. Entity Name
TEAM PONY BOY, INC.



Principal Place of Business
**3630 BENEVA OAKS DRIVE
SARASOTA, FL 34238 US**

Mailing Address
**3630 BENEVA OAKS DRIVE
SARASOTA, FL 34238 US**

40113300



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

07072008

Chg-P

CR2E034 (12/06)

4. FEI Number

26-0817010

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**HURLBURT, DAWN E
3630 BENEVA OAKS DRIVE
SARASOTA, FL 34238**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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

**FILE NOW!!! FEE IS \$550.00
Due by September 12, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRES HURLBURT, DAWN E 3630 BENEVA OAKS DRIVE SARASOTA, FL 34238	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TRES HURLBURT, DAWN E 3630 BENEVA OAKS DRIVE SARASOTA, FL 34238	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SECT HURLBURT, DAWN E 3630 BENEVA OAKS DRIVE SARASOTA, FL 34238	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIR HURLBURT, DAWN E 3630 BENEVA OAKS DRIVE SARASOTA, FL 34238	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIR MORRELL, GAWANI P 3630 BENEVA OAKS DRIVE SARASOTA, FL 34238	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing 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 or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/19/2008

Date

941-924-9243

Daytime Phone #