2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 15, 2009
Secretary of State

DOCUMENT# F07000004018

Entity Name: POM ENERGY CONCEPTS INC.

Current Principal Place of Business:

1554 ELMORE MOUNTAIN ROAD
MORRISVILLE, VT 05661

New Principal Place of Business:

Current Mailing Address:

1554 ELMORE MOUNTAIN ROAD
MORRISVILLE, VT 05661

New Mailing Address:

FEI Number: 20-8274236 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PHILLIPS, BILL
1005 WEST SKYVIEW CROSSING DRIVE
HERNANDO, FL 34442 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: P ( ) Delete
Name: CHIARAVALLE, PATRICIA
Address: 1554 ELMORE MOUNTAIN ROAD
City-St-Zip: MORRISVILLE, VT 05661

Title: S ( ) Delete
Name: PIPER, ARNOLD
Address: FAIRWOOD PARKWAY
City-St-Zip: MORRISVILLE, VT 05661

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: CHIARAVALLE, PETER
Address: 1554 ELMORE MOUNTAIN ROAD
City-St-Zip: MORRISVILLE, VT 05661

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

Title: T ( ) Change (X) Addition
Name: CHIARAVALLE, PATRICIA
Address: 1554 ELMORE MOUNTAIN ROAD
City-St-Zip: MORRISVILLE, VT 05661

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: PETER CHIARAVALLE P 02/15/2009
Electronic Signature of Signing Officer or Director Date