

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 10, 2006 8:00 am**  
**Secretary of State**

03-10-2006 90006 040 \*\*\*150.00

**DOCUMENT # G44947**

1. Entity Name  
**PONY EXPRESS FARMS, INC.**



Principal Place of Business  
**11348 LONG MEADOW DR  
WELLINGTON, FL 33414 US**

Mailing Address  
**12765 FOREST HILL BLVD  
1302  
WELLINGTON, FL 33414**

40028000



2. Principal Place of Business  
**11333 Long Meadow Dr**

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

02022006 Chg-P CR2E034 (11/05)

City & State

City & State

4. FEI Number  
**59-2304774**

Applied For  
Not Applicable

Zip Country

Zip Country

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**MENDOZA, MARIO G III P.A  
12765 FOREST HILL BLVD  
1302  
WELLINGTON, FL 33414**

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 \$150.00  
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE **PSTD** ☐ Delete  
NAME **DANIELS, ROBERT L**  
STREET ADDRESS **11348 LONG MEADOW DR**  
CITY- ST- ZIP **WEST PALM BEACH, FL**

TITLE **VP** ☒ Delete  
NAME **ECKBO, DANIELS, ANJA**  
STREET ADDRESS **11348 LONG MEADOW DR**  
CITY- ST- ZIP **WELLINGTON, FL 33414**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PSTD** ☒ Change ☐ Addition  
NAME **Daniels, Robert L.**  
STREET ADDRESS **11333 Long Meadow Dr.**  
CITY- ST- ZIP **Wellington, FL 33414**

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

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

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:

**Robert L. Daniels, Pres.**

**2/11/06**

**617-803-2203**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #