2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000094133

Entity Name: PONTOON, LLC

Address:

City-St-Zip:

PO BOX 471206

LAKE MONROE, FL 32747

FILED Jan 21, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: PO BOX 471206 575 N. ELDER ROAD LAKE MONROE, FL 32747 SANFORD, FL 32771 **Current Mailing Address: New Mailing Address:** PO BOX 471206 LAKE MONROE, FL 32747 FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MCKAY, HEATHER E 30913 BUTTERCUP LANE MOUNT DORA, FL 32757 US 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 MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM () Delete Title: () Change () Addition SCHWEIZER, TARA Name: Name: Address: PO BOX 471206 Address: City-St-Zip: LAKE MONROE, FL 32747 City-St-Zip: Title: MGR Title: () Delete () Change () Addition Name: LYONS, JANET Name: Address: PO BOX 471206 Address: City-St-Zip: LAKE MONROE, FL 32747 City-St-Zip: Title: MGR () Delete Title: () Change () Addition VAN-BERNUM, SUSAN Name: Name:

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

Address:

City-St-Zip:

SIGNATURE: TARA SCHWEIZER MGR 01/21/2009