2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 06, 2006
Secretary of State

DOCUMENT# N02000007973

Entity Name: PIG ON THE POND, INC.

Current Principal Place of Business:

1105 BOWMAN ST
CLERMONT, FL 34711

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 121543
CLERMONT, FL 347121543

New Mailing Address:

FEI Number: 54-2079731 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BOYETTE, WADE
1380 GRAND HWY STE 200
CLERMONT, FL 34711 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

OFFICERS AND DIRECTORS:

Title: V ( ) Delete
Name: LEE, STEPHEN
Address: 698 W.HIGHWAY 50
City-St-Zip: CLERMONT, FL 34711

Title: P ( ) Delete
Name: MACFARLANE, RONALD
Address: 25735WHISPER OAKS ROAD
City-St-Zip: LEESBURG, FL 34748

Title: ST ( ) Delete
Name: WALLACE, DENISE
Address: PO BOX 120158
City-St-Zip: CLERMONT, FL 34712

Title: D ( ) Delete
Name: MACKEY, JAMES
Address: 8728 SR 33
City-St-Zip: GROVELAND, FL 34736

Title: D ( ) Delete
Name: CHANCEY, DON
Address: 892 C478A
City-St-Zip: WEBSTER, FL 34739

Title: D ( ) Delete
Name: WINN, VICI
Address: PO BOX 121176
City-St-Zip: CLERMONT, FL 34712

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: LEE, STEPHEN
Address: 698 W.HIGHWAY 50
City-St-Zip: CLERMONT, FL 34711

Title: ST (X) Change ( ) Addition
Name: MACFARLANE, RONALD
Address: 4849 SABLE RIDGE COURT
City-St-Zip: LEESBURG, FL 34748

Title: P (X) Change ( ) Addition
Name: WALLACE, DENISE
Address: PO BOX 120158
City-St-Zip: CLERMONT, FL 34712

Title: V (X) Change ( ) Addition
Name: HESSBURG, SALLY
Address: 1679 ROSEWOOD
City-St-Zip: CLERMONT, FL 34711

Title: D (X) Change ( ) Addition
Name: HOGAN, KEITH
Address: 310 ALMOND STREET
City-St-Zip: CLERMONT, FL 34711

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

I hereby certify that the information supplied with this filing does not qualify for the 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RONALD MACFARLANE ST 01/06/2006

Electronic Signature of Signing Officer or Director — Date