2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000003034

Entity Name: POP, INC.

FILED Jul 08, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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395 TUSKAWILLA RD

WINTER SPRINGS, FL 32708 US

Current Mailing Address: New Mailing Address:

395 TUSKAWILLA RD

WINTER SPRINGS, FL 32708 US

FEI Number: 76-0754063 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

WAISANEN, TIMOTHY A SR.
258 OAK PARK PLACE
CASSELBERRY, FL 32707 US
WAISANEN, TIMOTHY A SR.
109 DRESDAN CT.
SANFORD, FL 32771 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: TIMOTHY A. WAISANEN 07/08/2005

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition Name: WAISANEN, TIMOTHY A SR.

Address: 250 OAK PARK PLACE

 Address:
 258 OAK PARK PLACE
 Address:
 109 DRESDAN CT.

 City-St-Zip:
 CASSELBERRY, FL 32707 US
 City-St-Zip:
 SANFORD, FL 32771 US

Title: VP,S () Delete Title: VP,S (X) Change () Addition

 Name:
 HASBUN, KARLA
 Name:
 WAISANEN, KARLA

 Address:
 712 SILVERWOOD DR.
 Address:
 109 DRESDAN CT.

 City-St-Zip:
 LAKE MARY, FL 32746 US
 City-St-Zip:
 SANFORD, FL 32771 US

Title: T () Delete Title: () Change () Addition

 Name:
 WAISANEN, SCOTT D SR.
 Name:

 Address:
 181 W. CRYSTAL LAKE AVE.
 Address:

 City-St-Zip:
 LAKE MARY, FL 32746 US
 City-St-Zip:

 $\label{eq:time_time_time_time} {\sf Title:} \qquad {\sf VP} \qquad (\) \, {\sf Delete} \qquad \qquad {\sf Title:} \qquad (\) \, {\sf Change} \, (\) \, {\sf Addition}$

 Name:
 DONOHO, JOE
 Name:

 Address:
 207 SHADY OAKS CIRCLE
 Address:

 City-St-Zip:
 LAKE MARY, FL 32746 US
 City-St-Zip:

 $\label{eq:title:title:title:top:problem} \mbox{VP} \qquad \mbox{() Delete} \qquad \qquad \mbox{Title:} \qquad \mbox{VP} \qquad \mbox{(X) Change () Addition}$

 Name:
 BRICK, GREG
 Name:
 BRICK, GREG

 Address:
 1114 LYNX TRAIL
 Address:
 P.O. BOX 196284

City-St-Zip: WINTER SPRINGS, FL 32708 US City-St-Zip: WINTER SPRINGS, FL 32719 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: TIMOTHY A. WAISANEN PRES 07/08/2005