

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000003034

FILED
May 03, 2008
Secretary of State

Entity Name: POP, INC.

Current Principal Place of Business:

109 DRESDAN CT.
SANFORD, FL 32771 US

New Principal Place of Business:

Current Mailing Address:

109 DRESDAN CT.
SANFORD, FL 32771 US

New Mailing Address:

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.
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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: WAISANEN, TIMOTHY A SR.
Address: 109 DRESDAN CT.
City-St-Zip: SANFORD, FL 32771 US

Title: VP,S () Delete
Name: WAISANEN, KARLA
Address: 109 DRESDAN CT.
City-St-Zip: SANFORD, FL 32771 US

Title: T () Delete
Name: WAISANEN, SCOTT D SR.
Address: 181 W. CRYSTAL LAKE AVE.
City-St-Zip: LAKE MARY, FL 32746 US

Title: VP () Delete
Name: DONOHO, JOE
Address: 207 SHADY OAKS CIRCLE
City-St-Zip: LAKE MARY, FL 32746 US

Title: VP () Delete
Name: BRICK, GREG
Address: P.O. BOX 196284
City-St-Zip: WINTER SPRINGS, FL 32719 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: T (X) Change () Addition
Name: WAISANEN, SCOTT D SR.
Address: 473 KAYS LANDING DR.
City-St-Zip: SANFORD, FL 32771 US

Title: VP (X) Change () Addition
Name: MOREAU, JOHN
Address: 709 TIMBERWILDE AVE.
City-St-Zip: WINTER SPRINGS, FL 32708 US

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

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 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

05/03/2008

Electronic Signature of Signing Officer or Director

Date