2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 29, 2009
Secretary of State

DOCUMENT# N44618

Entity Name: POD MANAGEMENT, INC.

Current Principal Place of Business:

3700 CLUBHOUSE LANE
BOYNTON BEACH, FL 33436

New Principal Place of Business:

Current Mailing Address:

3700 CLUBHOUSE LANE
BOYNTON BEACH, FL 33436

New Mailing Address:

FEI Number: 65-0276640 **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:

DICKER, KRIVOK & STOLOFF, P.A.
1818 AUSTRALIAN AVE, SO. #400
WEST PALM BEACH, FL 33409 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: PD ( ) Delete
Name: INGERMAN, ARNOLD
Address: 3700 CLUBHOUSE LN
City-St-Zip: BOYNTON BEACH, FL 33436

Title: VD ( ) Delete
Name: SHAPOT, HAROLD
Address: 3700 CLUBHOUSE LANE
City-St-Zip: BOYNTON BEACH, FL 33436

Title: TD ( ) Delete
Name: KAPLAN, ARMAND
Address: 3700 CLUBOHOUSE LANE
City-St-Zip: BOYNTON BEACH, FL 33436

Title: D ( ) Delete
Name: KUNZMAN, EDWIN
Address: 3700 CLUBHOUSE LANE
City-St-Zip: BOYNTON BEACH, FL 33436

Title: SD ( ) Delete
Name: COHEN, ALVIN
Address: 3700 CLUBHOUSE LANE
City-St-Zip: BOYNTON BEACH, FL 33436

Title: D ( ) Delete
Name: COWDEN, SANDER
Address: 3700 CLUBHOUSE LANE
City-St-Zip: BOYNTON BEACH, FL 33436

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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: ALVIN COHEN SD 05/29/2009

Electronic Signature of Signing Officer or Director — Date