

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000002550

Entity Name: PON TIMES, INC.

FILED  
Jan 08, 2004  
Secretary of State

**Current Principal Place of Business:**

540 77TH AVE  
ST PETE BEACH, FL 33706

**New Principal Place of Business:**

**Current Mailing Address:**

540 77TH AVE  
ST PETE BEACH, FL 33706

**New Mailing Address:**

FEI Number: 59-3570128

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

O'NEAL, CHERI  
540 77TH AVE  
ST PETE BEACH, FL 33706

**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: VD ( ) Delete  
Name: ROSENTHAL, JULIE  
Address: 540 77TH AVE  
City-St-Zip: ST PETE BEACH, FL 33706

Title: VD ( ) Delete  
Name: FINCH, MERRILEE  
Address: 540 77TH AVE  
City-St-Zip: ST PETE BEACH, FL 33706

Title: D ( ) Delete  
Name: O'NEAL, CHERI  
Address: 540 77TH AVE  
City-St-Zip: ST PETE BEACH, FL 33706

Title: D ( ) Delete  
Name: KAPELA, JERRY  
Address: 540 77TH AVE  
City-St-Zip: ST PETER BEACH, FL 33706

**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:

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: CHERI O'NEAL

D

01/08/2004

Electronic Signature of Signing Officer or Director

Date