2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P03000022743

1. Entity Name
PONY PRODUCTIONS, INC.

Principal Place of Business	Mailing Address
435 BREAKWATER DR ALTAMONTE SPRINGS, FL 32714	435 BREAKWATER DR ALTAMONTE SPRINGS, FL 32714

DO NOT WRITE IN THIS SPACE

01162008   No Chg-P   CR2E034 (11/05)

4. FEI Number	Applied For
14-1873815	Not Applicab

5. Certificate of Status Desired ☐   **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

ADKISON, JOAN F
435 BREAKWATER DR
ALTAMONTE SPRINGS, FL 32714

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8. 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. I am familiar with, and accep the obligations of registered agent.

SIGNATURE_____
Signature, typed or printed name of registered agent and title if applicable.   (NOTE: Registered Agent signature required when reinstating)   DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2008 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐   **$5.00** May Be Added to Fees

U000000793073
01/24/08-80035-006 150.00

10.   OFFICERS AND DIRECTORS

TITLE	PD
NAME	ADKISON, JOAN F
STREET ADDRESS	435 BREAKWATER DR
CITY - ST - ZIP	ALTAMONTE SPRINGS, FL 32714

TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

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NAME	
STREET ADDRESS	
CITY - ST - ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 i

Joan Finn Adkison   JOAN FINN ADKISON   1/16/08   407.421.7304