2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000104710

City-St-Zip:

SUNRISE, FL 33323

Entity Name: THE GREAT AMERICAN PONY DRIVE II. INC.

FILED Apr 14, 2005 Secretary of State

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Current Principal Place of Business:			New Principal Place of Business:		
3184 NW SUNRISE,	113 AVE. , FL 33323				
Current Mailing Address:			New Mailing Address:		
3184 NW SUNRISE,	113 AVE. , FL 33323				
FEI Number	: 26-0071948	FEI Number Applied For()	FEI Number Not App	licable () Certificate of Status Desired ()	
Name and	l Address of (Current Registered Agent:	Name and	Address of New Registered Agent:	
3184 NW		US			
	e named entity e of Florida.	submits this statement for the p	ourpose of changing i	its registered office or registered agent, or both,	
SIGNATUI					
	Electron	nic Signature of Registered Ag	ent	Date	
Election Ca	mpaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	TURNBULL, DA 3184 NW 113 A SUNRISE, FL	AVE. 33323	Title: Name: Address: City-St-Zip:	P/S (X) Change () Addition TURNBULL, DAVID S 3184 NW 113 AVE. SUNRISE, FL 33323	
Title: Name: Address: City-St-Zip:	VP (DRIPPS, RONI 3184 NW 1137 SUNRISE, FL	AVE.	Title: Name: Address: City-St-Zip:	VP/S (X) Change () Addition DRIPPS, RONDA B 3184 NW 113 AVE. SUNRISE, FL 33323	
Title: Name: Address: City-St-Zip:	SEC (ROBERTS, PE 4655 WALDEN MARIETTA, GA	LANE	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address:	D (PONY INVESTI 3184 NW 1137		Title: Name: Address:	() Change () Addition	

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

SIGNATURE: DAVID S. TURNBULL P 04/14/2005