## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE: /

## Aug 11, 2006 8:00 am Secretary of State DOCUMENT # P04000024426 1. Entity Name 08-11-2006 90001 014 \*\*\*150.00 POSH PONY, INC. Principal Place of Business Mailing Address 9927 FRUITVILLE RD 50024987 9927 FRUITVILLE RD SARASOTA, FL 34240 SARASOTA, FL 34240 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 07072006 CR2E034 (11/05) Chg-P City & State City & State 4. FEI Number Applied For 20-0681263 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent MYERS, BRENT J MYERS, BRENT J Street Address (P.O. Box Number is Not Acceptable) 3333 CLARK ROAD, SUITE 100 3859 BEE RIDGE RD STE 101 SARASOTA, FL 34233 City SARASOTA 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 accept the obligations of registered agent. SIGNATURE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be In accordance with s. 607.193(2)(b), F.S., the Due by September 6, 2006 Trust Fund Contribution. Added to Fees corporation did not receive the prior notice. 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE n ☐ Delete TITLE ☐ Change ☐ Addition SYLVESTER, MATHEW NAME NAME STREET ADDRESS 9927 FRUITVILLE RD STREET ADDRESS CITY-ST-ZIP SARASOTA, FL 34240 CITY-ST-ZIP TITLE ☐ Delete Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 received or the empowered to execut this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address with all other like expowered.

Daytime Phone #

POSH PONY, INC. 9927 Fruitville Road Sarasota, FL 34240 # po 4000 024424

July 7, 2006

DIVISION OF CORPORATIONS P.O. Box 1500 Tallahassee, Florida 32302-1500

Re: Annual Uniform Business Report, 2006 F.E.I.N. 20-0681263

## Dear Sir/Madam:

This letter is to request that the Florida Department of State reinstates POSH PONY, INC., F.E.I.N. 20-0681263, to an active status without penalty.

Our report was not filed in a timely manner due to never receiving notice from the State regarding the 2006 Annual Uniform Business Report. Enclosed please find our check in the amount of \$150.00 to cover the original filing fee along with our report.

Upon your review of the situation and circumstances, we request a written statement be provided from your organization that will notify us as to the outcome of this matter.

Thank you for your consideration and assistance in this matter.

Very truly yours,

Mathew Sylvester Enclosures