

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Apr 07 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT, 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P13574** (9)
1. Corporation Name
PONDER & CO.

Principal Place of Business
**217 WEST MONROE
HERRIN IL 62948**

Mailing Address
**217 WEST MONROE
HERRIN IL 62948**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 03/11/1987	
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.	4. FEI Number 37-1146412		Applied For Not Applicable	
22. City & State	27. City & State	5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
23. Zip	28. Zip	6. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees	
24. Country	29. Country	30. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. ☐ Yes ☐ No			

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
BRATTON, RICHARD E. 240 S. PINEAPPLE AVE. SUITE 801 SARASOTA FL 34236				81. Name	Robert Davis		
				82. Street Address (P.O. Box Number is Not Acceptable)	240 South Pineapple Avenue		
				83. Suite	Suite 801		
				84. City	Sarasota,	85. Zip Code	FL 34236

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE Robert Davis Robert Davis 4/1/98
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	PD	☒ DELETE	1.1 TITLE	PD	☒ Change ☐ Addition		
NAME	PONDER, C. LEE		1.2 NAME	Jerald P. Fiorina			
STREET ADDRESS	4005 SOUTHWOOD WEST		1.3 STREET ADDRESS	8 Dogwood Lane			
CITY-ST-ZIP	COLLEYVILLE TX		1.4 CITY-ST-ZIP	Herrin, IL 62948			
TITLE	VD	☒ DELETE	2.1 TITLE	D	☐ Change ☒ Addition		
NAME	BRATTON, RICHARD E.		2.2 NAME	Robert Gottschalk			
STREET ADDRESS	3842 W. PEREGRINE PT. CIR.		2.3 STREET ADDRESS	4302 Eaton Circle			
CITY-ST-ZIP	SARASOTA FL		2.4 CITY-ST-ZIP	Colleyville, TX 76034			
TITLE	TD	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition		
NAME	FIORINA, JERALD P.		3.2 NAME				
STREET ADDRESS	419 N. 21 ST.		3.3 STREET ADDRESS				
CITY-ST-ZIP	HERRIN IL		3.4 CITY-ST-ZIP				
TITLE	AS	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition		
NAME	TIMMERMAN, JOHN		4.2 NAME				
STREET ADDRESS	3 RED BUD LANE		4.3 STREET ADDRESS				
CITY-ST-ZIP	HERRIN IL		4.4 CITY-ST-ZIP				
TITLE	D	☐ DELETE	5.1 TITLE		☐ Change ☐ Addition		
NAME	PAYNE, CHRISTOHER T.		5.2 NAME				
STREET ADDRESS	634 HUMPHREY DRIVE		5.3 STREET ADDRESS				
CITY-ST-ZIP	EVERGREEN, CO		5.4 CITY-ST-ZIP				
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition		
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET ADDRESS				
CITY-ST-ZIP			6.4 CITY-ST-ZIP				

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or in an attachment with an address.

SIGNATURE: John Timmerman 3/16/98 618-940-7321

CR2E034 (10/97)