

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P15741

FILED
Apr 20, 2011
Secretary of State

Entity Name: PON REALTY I, INC.

Current Principal Place of Business:

3701 W. PLANO PARKWAY SUITE 200
TAX DEPARTMENT
PLANO, TX 75075 US

New Principal Place of Business:

Current Mailing Address:

3701 W. PLANO PARKWAY SUITE 200
TAX DEPARTMENT
PLANO, TX 75075 US

New Mailing Address:

FEI Number: 22-2825595 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE, FL 32301 US

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: D/P
Name: JONES, TAMARA S
Address: 3701 W. PLANO PARKWAY SUITE 200
City-St-Zip: PLANO, TX 75075

Title: DVP
Name: MARTIN, MARY N
Address: 3701 W. PLANO PARKWAY SUITE 200
City-St-Zip: PLANO, TX 75075

Title: DVP
Name: PASCUZZI, PETE
Address: 3701 W. PLANO PARKWAY SUITE 200
City-St-Zip: PLANO, TX 75075

Title: EVP
Name: FRANK, RICHARD A
Address: 3701 W. PLANO PARKWAY SUITE 200
City-St-Zip: PLANO, TX 75075

Title: EVP
Name: RICE, JON
Address: 3701 W. PLANO PARKWAY SUITE 200
City-St-Zip: PLANO, TX 75075

Title: VP
Name: EVANS, SHERRY L
Address: 3701 W. PLANO PARKWAY SUITE 200
City-St-Zip: PLANO, TX 75075

I hereby 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 all other like empowered.

SIGNATURE: TAMARA S. JONES

D/P

04/20/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date