2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000043696

Entity Name: WILLOW POND FARM, INC.

FILED Feb 15, 2010 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

400 WILLOW POND RD. MONTICELLO, FL 32344

Current Mailing Address: New Mailing Address:

400 WILLOW POND RD. PO BOX 641

MONTICELLO, FL 32344 MONTICELLO, FL 32345

FEI Number: 59-3387213 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SIMPSON, CLYDE B 217 WILLOW POND RD. MONTICELLO, FL 32344

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

Election Campaign Financing Trust Fund Contribution ().

US

OFFICERS AND DIRECTORS:

Title: CEC

Name: SIMPSON, CLYDE B Address: PO BOX 641 N/A City-St-Zip: MONTICELLO, FL 32345

Title: PD

Name: SIMPSON, TODD S Address: 96 WILLOW POND ROAD City-St-Zip: MONTICELLO, FL 32344

Title: VPST

Name: SIMPSON, KIMBERLY C Address: 96 WILLOW POND RD City-St-Zip: MONTICELLO, FL 32344

Title: [

Name: SIMPSON, JOSEPH A Address: 96 WILLOW POND RD City-St-Zip: MONTICELLO, FL 32344

 Title:
 D

 Name:
 SIMPSON, MATTHEW W

 Address:
 398 WILLOW POND RD

 City-St-Zip:
 MONTICELLO, FL 32344

Title: VP

Name: SIMPSON, DIANE Address: PO BOX 641

City-St-Zip: MONTICELLO, FL 32345

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: CLYDE B SIMPSON CEO 02/15/2010