2008 FOR PROFIT CORPORATION ANNUAL REPORT

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1. Entity Nam	DCUMENT # P98000020893 Itiy Name E PONDEROSA, INC.			SECRETARY OF STATE DIVISION OF CORPORATIONS 08 JAN 28 AM 10: 28			
Principal Plac 681 TYLER S QUINCY, FL	SANDERS RD	Mailing Address 681 TYLER SANDERS RD QUINCY, FL 32352			- 1866 1876 8877 8878 5 87	u manus (1871 GALB) (BUE 1810B (YUBB))) (BEI	
DO NOT WRITE IN THIS SPACE				01062008 4. FEI Number	No Chg-P	CR2E034 (11/05) Applied For	
6. Name and Address of Current Registered Agent			T.		of Status Desired	\$8.75 Additional Fee Required	
BRYANT, ROBERT H 681 TYLER SANDERS RD QUINCY, FL 32352				DO NOT WRITE IN THIS SPACE			
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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when renatating) DATE							
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.							
10,	OFFICERS AND DI	RECTORS					
NAME STREET ADDRESS CITY-ST-ZIP	CO BRYANT, ROBERT H 681 TYLER SANDERS RD QUINCY, FL 32352			ne T	001170 708-000	640507 5016 **163,75	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CO BRYANT, ELLEN S 681 TYLER SANDERS RD QUINCY, FL 32352						
NAME STREET ADDRESS CITY-ST-ZIP					NOT W		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SF	PACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
NAME STREET ADDRESS CITY-ST-ZIP	13/29/	08					
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 receiver or trustee empowered to execute 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 empowered.							
SIGNATURE: Kol 1/10 + Elly By Bruck 01/27/04 -895-647-9748							