

SCC eFile

2013 ANNUAL REPORT  
COMMONWEALTH OF VIRGINIA  
STATE CORPORATION COMMISSION

213519130

1.) CORPORATION NAME:

**Pocono Produce Co., Inc.**

DUE DATE: **4/30/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CT CORPORATION SYSTEM  
4701 COX RD STE 301  
GLEN ALLEN, VA**

SCC ID NO: **F1749268**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
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3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**HENRICO COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:

**PA**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: PO BOX 669

CITY/ST/ZIP: STROUDSBURG, PA 18360

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME:	TERRENCE B SNYDER	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRES/DIR		
ADDRESS:	1301 MAZZETTI ROAD		
CITY/ST/ZIP/CO:	STROUDSBURG, PA 18360		
NAME:	ROSEMARY D OLOFSSON	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	VP/DIR		
ADDRESS:	1305 MAZZETTI ROAD		
CITY/ST/ZIP/CO:	STROUDSBURG, PA 18360		
NAME:	DANA S AHNERT	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	ASST SECRETARY		
ADDRESS:	1629 E. Sugar Mtn Rd		
CITY/ST/ZIP/CO:	BUSHKILL, PA 18324		
NAME:	MARIANNE D SNYDER	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	SECY/DIR		
ADDRESS:	1301 MAZZETTI ROAD		
CITY/ST/ZIP/CO:	STROUDSBURG, PA 18360		
NAME:	Kristin M. McDonald	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	8109 St. Martin		
CITY/ST/ZIP/CO:	Philadelphia, PA 19118		
NAME:	Kara M Snyder	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	1303 Mazzetti Rd		
CITY/ST/ZIP/CO:	Stroudsburg., PA 18360		

NAME: Drew E Snyder TITLE: DIRECTOR ADDRESS: 1301 Mazzetti Rd CITY/ST/ZIP/CO: Stroudsburg, PA 18360	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR	
NAME: Ray Singer TITLE: DIRECTOR ADDRESS: 120 Independence Rd CITY/ST/ZIP/CO: E. Stroudsburg, PA 18301	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR	
NAME: Kevin T Ahnert TITLE: DIRECTOR ADDRESS: 1629 E. Sugar Mtn Rd CITY/ST/ZIP/CO: Bushkill, PA 18324	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR	
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.		
/s/ TERRENCE B SNYDER	TERRENCE B SNYDER, PRES/DIR	4/23/2013
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	DATE
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.		