


2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 22, 2006 08:00 AM
Secretary of State

DOCUMENT # P04000102766 1. Entity Name NICK PODESTA INC.	
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Principal Place of Business 2911 RIVERSIDE DR PUNTA GORDA FL 33950	Mailing Address 2911 RIVERSIDE DR PUNTA GORDA FL 33950
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2. Principal Place of Business 2911 RIVERSIDE DR Suite, Apt. #, etc. Punta Gorda City & State Punta Gorda FL Zip 33950	3. Mailing Address 2911 RIVERSIDE DR Suite, Apt. #, etc. Punta Gorda City & State Punta Gorda FL Zip 33950
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1st MOORE CR2E034 (10/05)

4. FEI Number 20-1374636	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**PODESTA, NICK
2911 RIVERSIDE DR
PUNTA GORDA FL 33950**

7. Name and Address of New Registered Agent

Name _____
 Street Address (P O. Box Number is Not Acceptable) _____
 City **FL** Zip Code _____

B. 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 _____ (NOTE Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee Will Be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS		<input type="checkbox"/> Delete
TITLE	P/D	
NAME	PODESTA, NICK	<input type="checkbox"/>
STREET ADDRESS	2911 RIVERSIDE DR	
CITY-ST-ZIP	PUNTA GORDA FL 33950	
TITLE	VP/T	<input type="checkbox"/>
NAME	PODESTA, NICK	
STREET ADDRESS	2911 RIVERSIDE DR	
CITY-ST-ZIP	PUNTA GORDA FL 33950	
TITLE	S	<input type="checkbox"/>
NAME	PODESTA, NICK	
STREET ADDRESS	2911 RIVERSIDE DR	
CITY-ST-ZIP	PUNTA GORDA FL 33950	
TITLE	D	<input type="checkbox"/>
NAME	DUSTIN, SYLVIA	
STREET ADDRESS	2911 RIVERSIDE DR	
CITY-ST-ZIP	PUNTA GORDA FL 33950	
TITLE	D	<input type="checkbox"/>
NAME	PODESTA, MIKE	
STREET ADDRESS	2911 RIVERSIDE DR	
CITY-ST-ZIP	PUNTA GORDA FL 33950	
TITLE		<input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10.		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
TITLE	U00000477452		
NAME	04/06/06-80051-021 150.00	<input type="checkbox"/>	<input type="checkbox"/>
STREET ADDRESS			
CITY-ST-ZIP			
TITLE		<input type="checkbox"/>	<input type="checkbox"/>
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE		<input type="checkbox"/>	<input type="checkbox"/>
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE		<input type="checkbox"/>	<input type="checkbox"/>
NAME			
STREET ADDRESS			
CITY-ST-ZIP			

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: Nick Podesta **1-23-06** **941-575-1438**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #