

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT



**FILED**  
**Jul 17, 2008 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P97000040860</b> 1. Entity Name <b>GEORGE POST &amp; COMPANY</b>	
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Principal Place of Business <b>101 EAST KENNEDY BOULEVARD</b> <b>SUITE 1490</b> <b>TAMPA, FL 33602 US</b>	Mailing Address <b>101 EAST KENNEDY BOULEVARD</b> <b>SUITE 1490</b> <b>TAMPA, FL 33602 US</b>
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07152008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number <b>59-3446669</b>	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> <b>\$8.75</b> Additional Fee Required	

6. Name and Address of Current Registered Agent

JEFFRIES, DAVID M  
101 E. KENNEDY BLVD  
TAMPA, FL 33602

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) \_\_\_\_\_ DATE \_\_\_\_\_

FILE NOW!!! FEE IS \$550.00  
Due by September 12, 2008

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

10. OFFICERS AND DIRECTORS	
TITLE	P
NAME	POST, GEORGE
STREET ADDRESS	1200 GULF BOULEVARD SUITE 1502
CITY - ST - ZIP	CLEARWATER BEACH, FL 33767
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

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U00000955379  
07/17/08-80004-002 558.75

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 or other I am empowered.

SIGNATURE: *George Post* **George Post** 7/15/08 813-228-6444  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #