## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT # F00000006996

1. Entity Name

POST MANAGEMENT INC. OF SARASOTA



Principal Place of Business

2341 PORTER LAKE DRIVE

STE 109

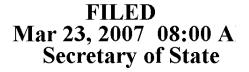
SARASOTA, FL 34240-7834

Mailing Address

2341 PORTER LAKE DRIVE

STE 109

SARASOTA, FL 34240-7834





02222007

No Chg-P

CR2E034 (11/05)

4. FEI Number 34-1737626

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

POST, MURRAY 2341 PORTER LAKE DR., STE 109 SARASOTA, FL 34240

## 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 Aggistered Agent signs				gured when reinstating)	DATE
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00  9. Election Camp Trust Fund Cor			cing	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	CTORS	Mark St.	1000 40 Want	A STEET STORY OF BUILDING BESTER WELL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P POST, MURRAY 2341 PORTER LAKE DRIVE, STE 109 SARASOTA, FL				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S POST, SUSAN 2341 PORTER LAKE DRIVE, STE 109 SARASOTA, FL	)			Ünoodos76583 09/30/07-80066-025 150.0
TITLE NAME STREET AODRESS CITY-ST-ZIP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN T	HIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE 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 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-ell-other like empowered.					