

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F93000003092

FILED  
Apr 07, 2011  
Secretary of State

Entity Name: POST SERVICES, INC.

**Current Principal Place of Business:**

4401 NORTHSIDE PARKWAY  
SUITE 800  
ATLANTA, GA 30327

**New Principal Place of Business:**

**Current Mailing Address:**

4401 NORTHSIDE PARKWAY  
SUITE 800  
ATLANTA, GA 30327

**New Mailing Address:**

FEI Number: 58-2056774

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

NRAI SERVICES, INC.  
515 E. PARK AVENUE  
TALLAHASSEE, FL 32301 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: STOCKERT, DAVID P  
Address: 4401 NORTHSIDE PARKWAY, SUITE 800  
City-St-Zip: ATLANTA, GA 30327

Title: SECT  
Name: COHEN, SHERRY W  
Address: 4401 NORTHSIDE PARKWAY, SUITE 800  
City-St-Zip: ATLANTA, GA 30327

Title: CFO  
Name: PAPA, CHRISTOPHER J  
Address: 4401 NORTHSIDE PARKWAY, SUITE 800  
City-St-Zip: ATLANTA, GA 30327

Title: DIR  
Name: BLOOM, HERSCHEL M  
Address: 4401 NORTHSIDE PARKWAY, SUITE 800  
City-St-Zip: ATLANTA, GA 30327

Title: DIR  
Name: GODDARD III, ROBERT C  
Address: 4401 NORTHSIDE PARKWAY, SUITE 800  
City-St-Zip: ATLANTA, GA 30327

Title: DIR  
Name: FRENCH, RUSSELL R  
Address: 4401 NORTHSIDE PARKWAY, SUITE 800  
City-St-Zip: ATLANTA, GA 30327

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: SHERRY W. COHEN

SECT

04/07/2011

Electronic Signature of Signing Officer or Director

Date