2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000000267

Entity Name: PODZAMSKY, LLC

Name:

Address:

City-St-Zip:

SAVARESE ENTERPRISES, LLC

3195 TAMIAMI TRAIL STE 204

PORT CHARLOTTE, FL 33952

FILED Apr 05, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 4604 ATLANTIC BLVD., SUITE 7 JACKSONVILLE, FL 32207 **Current Mailing Address: New Mailing Address:** 3195 TAMIAMI TRAIL PORT CHARLOTTE, FL 33952 FEI Number: 59-3691075 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: WEBBER ASSOCIATES, LC 3195 TAMIAMI TRAIL 204 PORT CHARLOTTE, FL 33952 US 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 MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete PODZAMSKY II LLC, Name: Name: 4604 ATLANTIC BLVD STE 7 Address: Address: City-St-Zip: JACKSONVILLE, FL 32207 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: WEBBER ASSOCIATES LC, Name: Address: 3195 TAMIAMI TRAIL SUITE 204 Address: City-St-Zip: PORT CHARLOTTE, FL 33952 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition DELEGAL GROUP LC, Name: Name: Address: 3195 TAMIAMI TRAIL STE 204 Address: City-St-Zip: PORT CHARLOTTE, FL 33952 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

Name:

Address:

City-St-Zip:

SIGNATURE: LINDA K. DELEGAL MGR 04/05/2007