## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000086293

City-St-Zip: MIMS, FL 32754

FILED Apr 30, 2008 Secretary of State

Entity Nar	ne: POSTAGI	E SAVERS, INC.				
Current Principal Place of Business:			New Prince	New Principal Place of Business:		
9 MAIN ST TITUSVILL	E, FL 32796					
Current Mailing Address:			New Maili	New Mailing Address:		
9 MAIN ST STE 1 TITUSVILL	E, FL 32796					
FEI Number:	20-0142843	FEI Number Applied For ( )	FEI Number Not Appl	licable ( )	Certificate of Status Desired ( )	
Name and	Address of C	urrent Registered Agent:	Name and	Name and Address of New Registered Agent:		
5026 CAMI MIMS, FL						
I he above in the State		ubmits this statement for the pu	urpose of changing i	ts registered	office or registered agent, or both,	
SIGNATUR	RE:					
	Electron	ic Signature of Registered Ager	nt		Date	
Election Can	npaign Financing	Trust Fund Contribution ( ).				
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	D () WENNEBERG, 5026 CAMBRID MIMS, FL 3275	GE DR	Title: Name: Address: City-St-Zip:	(	) Change ()Addition	
Title: Name: Address: City-St-Zip:	D () HANSEN, LINDA 605 GASLIGHT ALGONQUIN, IL	DR	Title: Name: Address: City-St-Zip:	(	) Change ()Addition	
Title: Name:	D () WEINEBERG, L		Title: Name:	D ( WENNEBERG	•	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

City-St-Zip: MIMS, FL 32754

SIGNATURE: LUKE WENNEBERG 04/30/2008 DIR