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Secretary of State
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2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # S74344

1. Entity Name
POST, BUCKLEY INTERNATIONAL, INC.

40008538

Principal Place of Business	Mailing Address
5300 W. CYPRESS ST. STE 200 TAMPA, FL 33607	5300 W. CYPRESS ST. STE 200 TAMPA, FL 33607

01252007 Chg-P CR2E034 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 52-1746843 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
SCHAFFER, BECKY S. ESQ. 5300 W. CYPRESS ST. STE 200 TAMPA, FL 33607	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when necessary)

FILE NOW!!! FEE IS $150.00
After May 1, 2007 Fee will be $550.00

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

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD PAULSEN, ROBERT J 482 SOUTH KELLER ROAD ORLANDO, FL 328106101	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D/S Cecilia R. Green 6504 Bridge Point Parkway, Ste. 200 Austin, TX 78730	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VT VRANA, DONALD J 5300 W. CYPRESS ST. SUITE 200 TAMPA, FL 33607	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D/V/T	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V BOATMAN, LARRY A 200 DAINGERFIELD ROAD, STE 201 ALEXANDRIA, VA 22314	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D/V Susan S. Chang-Dible 1200 2nd Street Sacramento, CA 95814	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CP ZUMWALT, JOHN B 5300 W. CYPRESS ST. SUITE 200 TAMPA, FL 33607	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	C	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V MCQUEEN, ROBERT M 482 SOUTH KELLER ROAD ORLANDO, FL 328106101	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P/D 401 B Street, Ste. 800 San Diego, CA 92101	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	AS SCHAFFER, BECKY S 5300 W. CYPRESS ST. SUITE 200 TAMPA, FL 33607	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

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 all other like empowered.

SIGNATURE: Donald J. Vrana Jan 24, 2007 813-282-7275
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #