

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000078499

FILED  
Mar 18, 2011  
Secretary of State

**Entity Name:** PORT ENTERPRISES, LLC

**Current Principal Place of Business:**

500 STATE ROAD 436  
SUITE 2078  
CASSELBERRY, FL 32707

**New Principal Place of Business:**

**Current Mailing Address:**

500 STATE ROAD 436  
SUITE 2078  
CASSELBERRY, FL 32707

**New Mailing Address:**

**FEI Number:** 20-1816198      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

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

PORT, MANDY  
2135 DURBAN COURT  
OVIEDO, FL 32765 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

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: PORT, DAVID  
Address: 2141 DURBAN COURT  
City-St-Zip: OVIEDO, FL 32765

Title: MGRM  
Name: PORT, AMANDA  
Address: 2135 DURBAN COURT  
City-St-Zip: OVIEDO, FL 32765

I hereby 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.

SIGNATURE: MANDY PORT

MRS

03/18/2011

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date