

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 701471

FILED
Apr 10, 2009
Secretary of State

Entity Name: PORT REPOSE INC

Current Principal Place of Business:

1601 SE 15TH ST
FT LAUDERDALE, FL 33316

New Principal Place of Business:

1601-1605 SE 15TH ST
FT LAUDERDALE, FL 33316

Current Mailing Address:

1601 SE 15TH ST
FT LAUDERDALE, FL 33316

New Mailing Address:

1601-1605 SE 15TH ST
FT LAUDERDALE, FL 33316

FEI Number: 59-1032795

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VERGO, JOHN
1601 SE 15TH STREET
APT 7B
FT. LAUDERDALE, FL 33316 US

Name and Address of New Registered Agent:

ADAMS, DANIEL
1601 SE 15TH STREET
APT 4B
FT. LAUDERDALE, FL 33316 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: DANIEL ADAMS

04/10/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DS () Delete
Name: POPE, SUSAN
Address: 1605 SE 15TH STREET 7A
City-St-Zip: FORT LAUDERDALE, FL 33316

Title: DT () Delete
Name: EVERHART, BONNIE
Address: 1605 S.E. 15TH ST. 4-A
City-St-Zip: FT. LAUDERDALE, FL 33316

Title: DP () Delete
Name: VERGO, JOHN
Address: 1601 SE 15TH STREET 7B
City-St-Zip: FORT LAUDERDALE, FL 33316

Title: DV () Delete
Name: CHANDLER, DAVID
Address: 1605 SE 15TH STREET 1B
City-St-Zip: FORT LAUDERDALE, FL 33316

Title: DV () Delete
Name: ANSTETT, ELIZABETH
Address: 1605 SE 15TH STREET 2A
City-St-Zip: FORT LAUDERDALE, FL 33316

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DP (X) Change () Addition
Name: EVERHART, BONNIE
Address: 1605 S.E. 15TH ST. 4A
City-St-Zip: FT. LAUDERDALE, FL 33316

Title: DT (X) Change () Addition
Name: ADAMS, DANIEL
Address: 1601 SE 15TH STREET 4B
City-St-Zip: FORT LAUDERDALE, FL 33316

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BONNIE EVERHART

DP

04/10/2009

Electronic Signature of Signing Officer or Director

Date