

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F10000000284

FILED  
Apr 26, 2011  
Secretary of State

Entity Name: PORTS PETROLEUM COMPANY, INC.

**Current Principal Place of Business:**

1337 BLACHLEYVILLE ROAD  
WOOSTER, OH 44691

**New Principal Place of Business:**

**Current Mailing Address:**

POST OFFICE BOX 1046  
WOOSTER, OH 44691

**New Mailing Address:**

FEI Number: 34-1017949

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BUSINESS FILINGS INCORPORATED  
1203 GOVERNOR'S SQUARE BLVD  
SUITE 101  
TALLAHASSEE, FL 323012960 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

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: PORTS, MICHAEL D  
Address: 2824 HAPPY VALLEY ROAD  
City-St-Zip: WOOSTER, OH 44691

Title: STD  
Name: HENDERSON, BARRY W  
Address: 7700 HAAS ROAD  
City-St-Zip: WOOSTER, OH 44691

Title: D  
Name: PORTS, LORI C  
Address: 2824 HAPPY VALLEY ROAD  
City-St-Zip: WOOSTER, OH 44691

Title: D  
Name: CRAWFORD, DOUGLAS B  
Address: 1222 EASTON STREET NE  
City-St-Zip: NORTH CANTON, OH 44721

Title: V  
Name: TEAGUE, JOEL  
Address: 1936 BURNETTS CORNER ROAD  
City-St-Zip: WOOSTER, OH 44691

Title: V  
Name: PEEPLES, ROBERT K  
Address: 966 BUCHOLZ  
City-St-Zip: WOOSTER, OH 44691

I hereby 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 all other like empowered.

SIGNATURE: BARRY HENDERSON

STD

04/26/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date