## 2011 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F10000002818

FILED Apr 20, 2011 Secretary of State

Entity Name: INNOVATIONS PORT SUPPORT SERVICES INCORPORATED

Current Principal Place of Business: New Principal Place of Business:

609 CHURCH STREET 609 CHURCH STREET

SUITE 205 SUITE 205

PORT HAWKASBURY, NOVA SCOTIA. PORT HAWKASBURY, NS B9A 2X4

Current Mailing Address: New Mailing Address:

609 CHURCH STREET 609 CHURCH STREET

SUITE 205 SUITE 205

PORT HAWKASBURY, NOVA SCOTIA, PORT HAWKASBURY,, NS B9A 2X4

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

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

NRAI SERVICES, INC. 515 E. PARK AVENUE

TALLAHASSEE, FL 32301 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:

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title: PD

 Name:
 MACNEIL, WILFRED

 Address:
 32 HIGHWAY 4, 6054P,

 City-St-Zip:
 JOHNSTOWN, NS B0E 3B0

Title: SD

Name: SAMPSON, ROSE
Address: 53 SHORE ROAD,
City-St-Zip: L'ARDOISE, NS B0E 3B0

Title: D

 Name:
 MACNEIL, ELIZABETH

 Address:
 32 HIGHWAY 4, 6054P,

 City-St-Zip:
 JOHNSTOWN, NS B0E 3B0

Title: [

Name: PEVERELL, DONALD G Address: 485 SOUTH PARK STREET, City-St-Zip: HALIFAX, NS B3J 3S9

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: WILFRED MACNEIL PRES 04/20/2011