

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **H37893** (5)

1. Corporation Name

PORRITT ENTERPRISES, INC.



Principal Place of Business

**% ALFRED C. PORRITT
5311 11TH ST. CIRCLE E.
BRADENTON FL 34203**

Mailing Address

**% ALFRED C. PORRITT
5311 11TH ST. CIRCLE E.
BRADENTON FL 34203**

2. Principal Place of Business

2a. Mailing Address

21	Suite, Apt. #, etc.		26	Suite, Apt. #, etc.	
22	City & State		27	City & State	
23	Zip	Country	28	Zip	Country
24			29		

9. Name and Address of Current Registered Agent

**PORRITT, PATRICIA A.
5311 11TH ST. CIRCLE E.
BRADENTON FL 34203**

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
FL	85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1505, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE **Patricia A. Porritt, VP**

Patricia A. Porritt

5/24/96

Date

12. OFFICERS AND DIRECTORS

TITLE	ST	☒ DELETE
NAME	PORRITT, GEORGIA K.	
STREET ADDRESS	255 GATES CREEK RD. NE	
CITY- ST- ZIP	BRADENTON FL	
TITLE	V	☐ DELETE
NAME	PORRITT, PATRICIA A.	
STREET ADDRESS	5311 11TH ST. CIR E	
CITY- ST- ZIP	BRADENTON FL	
TITLE	P	☐ DELETE
NAME	PORRITT, MICHAEL M.	
STREET ADDRESS	255 GATES CREEK RD. NE	
CITY- ST- ZIP	BRADENTON FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY- ST- ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	ST	☐ Change ☒ Addition
2. NAME	JoAnn Masters	
3. STREET ADDRESS	732 Hancock St.	
4. CITY- ST- ZIP	Hancock, MI. 49931	
5. TITLE		☐ Change ☐ Addition
6. NAME		
7. STREET ADDRESS		
8. CITY- ST- ZIP		
9. TITLE		☐ Change ☐ Addition
10. NAME		
11. STREET ADDRESS		
12. CITY- ST- ZIP		
13. TITLE		☐ Change ☐ Addition
14. NAME		
15. STREET ADDRESS		
16. CITY- ST- ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Patricia A. Porritt* Patricia A. Porritt VP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/24/96 941-749-0316

Date

Division File #

CR2E034 (12/95)