2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J08019

Entity Name: MICHAEL W. PORTER, P.A.

FILED Feb 07, 2005 Secretary of State

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

535-49TH ST. N. 535 49TH STREET NORTH

ST. PETERSBURG, FL 337107319 US ST. PETERSBURG, FL 337107319 US

Current Mailing Address: New Mailing Address:

535 49TH STREET NORTH

ST. PETERSBURG, FL 337107319 US

FEI Number: 59-2654432 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

PORTER, MICHAEL W.
535 49TH ST N
535 49TH STREET NORTH

ST. PETERSBURG, FL 33710 US ST. PETERSBURG, FL 33710 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: MICHAEL W. PORTER 02/07/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

PSTD () Delete Title: PSTD (X) Change () Addition

 Name:
 PORTER, MICHAEL W.
 Name:
 PORTER, MICHAEL W.

 Address:
 403 HARBOR VIEW LANE
 Address:
 403 HARBOR VIEW LANE

 City-St-Zip:
 LARGO, FL 33770
 City-St-Zip:
 LARGO, FL 33770

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHAEL W. PORTER PSTD 02/07/2005