

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000008008

Entity Name: PORTER'S PLACE, LLC

FILED
May 01, 2004
Secretary of State

Current Principal Place of Business:

9643 NW 45TH STREET
SUNRISE, FL 33351

New Principal Place of Business:

4535 N. PINE ISLAND ROAD
SUNRISE, FL 33351

Current Mailing Address:

9643 NW 45TH STREET
SUNRISE, FL 33351

New Mailing Address:

4535 N. PINE ISLAND ROAD
SUNRISE, FL 33351

FEI Number: 26-0061443

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PORTER, DARYL M
9643 NW 45TH STREET
SUNRISE, FL 33351 US

Name and Address of New Registered Agent:

PORTER, DARYL M
4535 N. PINE ISLAND ROAD
SUNRISE, FL 33351 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: DARYL M. PORTER

05/01/2004

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM () Change (X) Addition
Name: PORTER, DARYL M PROPRIE
Address: 4535 N. PINE ISLAND ROAD
City-St-Zip: SUNRISE, FL 33351 US

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: DARYL M. PORTER

MGRM

05/01/2004

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date