

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000078499

**Entity Name:** PORT ENTERPRISES, LLC

**FILED**  
**Mar 22, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

500 STATE ROAD 436  
SUITE 2078  
CASSELBERRY, FL 32707

**New Principal Place of Business:**

**Current Mailing Address:**

500 STATE ROAD 436  
SUITE 2078  
CASSELBERRY, FL 32707

**New Mailing Address:**

**FEI Number:** 20-1816198

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PORT, MANDY  
2141 DURBAN COURT  
OVIEDO, FL 32765 US

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

PORT, MANDY  
2135 DURBAN COURT  
OVIEDO, FL 32765 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

03/22/2010

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: PORT, DAVID  
Address: 2141 DURBAN COURT  
City-St-Zip: OVIEDO, FL 32765

Title: MGRM  
Name: PORT, AMANDA  
Address: 2135 DURBAN COURT  
City-St-Zip: OVIEDO, FL 32765

I hereby 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: MANDY PORT

MRS

03/22/2010

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