2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000087500

Entity Name: PORTAL SUPPLIES + DESIGN LLC

FILED Mar 08, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
4000 4 FOX OLOVE OF	ACCA DI ACIALIANE DI VO

13624 FOX GLOVE ST.

WINTER GARDEN, FL 34787

1934 BLACK LANE BLVD
WINTER GARDEN, FL 34787

WINTER GARDEN, FL 34787

Current Mailing Address: New Mailing Address:

13624 FOX GLOVE ST. 1934 BLACK LANE BLVD WINTER GARDEN, FL 34787 WINTER GARDEN, FL 34787

FEI Number: 02-0751208 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:

CHESTER W. INGALLS, CPA 3495 5TH AVENUE N. ST. PETERSBURG, FL 33713 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

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGRM () Delete Title: () Change () Addition

 Name:
 GREW, JOHN A
 Name:

 Address:
 25 LATHKILL GROVE, BUXTON
 Address:

 City-St-Zip:
 DERBYSHIRE, SK17 7PH, U.K., XX
 City-St-Zip:

Title: MGRM () Delete Title: () Change () Addition

 Name:
 GREW, HELEN
 Name:

 Address:
 25 LATHKILL GROVE, BUXTON
 Address:

 City-St-Zip:
 DERBYSHIRE, SK17 7PH, U.K., XX
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: JOHN GREW MR 03/08/2009