

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000019545

FILED
Apr 14, 2009
Secretary of State

Entity Name: PORTS AMERICA TAMPA, LLC

Current Principal Place of Business:

2510 GUY N. VERGER BLVD.
TAMPA, FL 33602

New Principal Place of Business:

2510 GUY N. VERGER BLVD.
TAMPA, FL 33602 US

Current Mailing Address:

99 WOOD AVE SOUTH
% PORTS AMER, INC.-ATTN: MAUREEN WALSH
ISELIN, NJ 08830

New Mailing Address:

99 WOOD AVE SOUTH
8TH FLOOR
ISELIN, NJ 08830 US

FEI Number: 43-2096934

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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:

Title: MGRM () Delete
Name: EDWARDS, STEPHEN
Address: 49 WOOD AVE. S. - 8TH FL.
City-St-Zip: ISELIN, NJ 08830

Title: D (X) Delete
Name: FERRUCCI, MARK
Address: 99 WOOD AVE. S. -8TH FL.
City-St-Zip: ISELIN, NJ 08830

Title: VP (X) Delete
Name: JONES, LARRY
Address: 2510 GUY N. VERGER BLVD.
City-St-Zip: TAMPA, FL 33602

Title: TS (X) Delete
Name: MAUREEN, WALSH
Address: 99 WOOD AVE. S.- 8TH FL.
City-St-Zip: ISELIN, NJ 08830

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: PORTS AMERICA GULFPORT, INC.
Address: 1105 30TH AVE., SUITE 201
City-St-Zip: GULFPORT, MS 39501 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: DEBORAH TELMAN, SECRETARY

MGRM

04/14/2009

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