

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000003375

**FILED**  
**Mar 12, 2010**  
**Secretary of State**

**Entity Name:** PORTER ABD, LLC

**Current Principal Place of Business:**

6610 NW 66TH WAY  
POMPANO BEACH, FL 33067

**New Principal Place of Business:**

525 NW LAKE WHITNEY PL  
201  
PORT ST LUCIE, FL 34986

**Current Mailing Address:**

6610 NW 66TH WAY  
POMPANO BEACH, FL 33067

**New Mailing Address:**

525 NW LAKE WHITNEY PL  
201  
PORT ST LUCIE, FL 34986

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

CUMBER, AFTAB A  
10100 W. SAMPLE RD.  
SUITE 205  
CORAL SPRINGS, FL 33065 US

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

WILLARD, DANNY L  
525 NW LAKE WHITNEY PL  
201  
PORT ST LUCIE, FL 34986 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: DANNY WILLARD

03/12/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: WILLARD, ALAN  
Address: 525 NW LAKE WHITNEY PL  
City-St-Zip: PORT ST LUCIE, FL 34986

Title: MGR  
Name: WILLARD, DANNY L  
Address: 525 NW LAKE WHITNEY PL  
City-St-Zip: PORT ST LUCIE, FL 34986

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: DANNY WILLARD

MR

03/12/2010

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