

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000008336

FILED  
Jan 16, 2009  
Secretary of State

Entity Name: PORCH DE SALOMON CORP

## Current Principal Place of Business:

357 OLD BUZBEE RD.  
MONTICELLO, FL 32344

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 10509  
TALLAHASSEE, FL 32302

## New Mailing Address:

FEI Number: 20-2737505

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

THOMSON, FRED  
3375-G CAPITAL CIR NE  
TALLAHASSEE, FL 32308 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

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: FORD, MARK F  
Address: 137 ARMSTRONG RD  
City-St-Zip: MONTICELLO, FL 32344

Title: T ( ) Delete  
Name: THOMSOM, FRED  
Address: 812 GREENBRIER LN  
City-St-Zip: TALLAHASSEE, FL 32308

Title: D ( ) Delete  
Name: MONROE, DANIEL LLOYD  
Address: P.O. BOX 10509  
City-St-Zip: TALLAHASSEE, FL 32302

Title: D ( ) Delete  
Name: MONROE, MELANIE  
Address: P.O. BOX 10509  
City-St-Zip: TALLAHASSEE, FL 32302

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: T (X) Change ( ) Addition  
Name: THOMSOM, FRED  
Address: 812 GREENBRIER LANE  
City-St-Zip: TALLAHASSEE, FL 32308

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 or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: W. FREDERICK THOMSON

T

01/16/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date