2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000009630

Entity Name: PORTAL MEDIA GROUP, INC.

FILED Apr 29, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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705 SW 23RD ST 434 SW 6TH AVE

CAPE CORAL, FL 33991 CAPE CORAL, FL 33991

Current Mailing Address: New Mailing Address:

705 SW 23RD ST PO BOX 150628

CAPE CORAL, FL 33991 CAPE CORAL, FL 33915

FEI Number: 80-0282235 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:

BRANAN, KATHRYN
705 SW 23RD ST

BRANAN, KATHRYN
434 SW 6TH AVE

CAPE CORAL, FL 33991 US CAPE CORAL, FL 33991 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: 04/29/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: TP () Delete Title: () Change () Addition

 Name:
 MCLAUGHLIN, JOSHUA
 Name:

 Address:
 14380 RIVA DEL LAGO #1903
 Address:

 City-St-Zip:
 FT MYERS, FL 33907
 City-St-Zip:

Title: () Delete Title: (X) Change () Addition Name: MSLAUGHLIN, CATHERINE Name: MCLAUGHLIN, CATHERINE Address: 14380 RIVA DEL LAGO #1903 Address: 14380 RIVA DEL LAGO #1903 City-St-Zip: FT MYERS, FL 33907 City-St-Zip: FT MYERS, FL 33907

Title: TV () Delete Title: TV (X) Change () Addition

 Name:
 BRANAN, SCOTT
 Name:
 BRANAN, SCOTT

 Address:
 705 SW 23RD ST
 Address:
 434 SW 6TH AVE

 City-St-Zip:
 CAPE CORAL, FL 33991
 City-St-Zip:
 CAPE CORAL, FL 33991

 Name:
 BRANAN, KATHRYN
 Name:
 BRANAN, KATHRYN

 Address:
 705 SW 23RD ST
 Address:
 434 SW 6TH AVE

 City-St-Zip:
 CAPE CORAL, FL 33991
 City-St-Zip:
 CAPE CORAL, FL 33991

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: KATHRYN BRANAN TT 04/29/2009