

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P01000059292

**FILED**  
**May 01, 2012**  
**Secretary of State**

**Entity Name:** THE PORTERS & IMPORTERS COMPANY

**Current Principal Place of Business:**

290 PINE STREET  
ATLANTIC BEACH, FL 322334014

**New Principal Place of Business:**

290 PINE STREET  
ATLANTIC BEACH, FL 32233

**Current Mailing Address:**

290 PINE STREET  
ATLANTIC BEACH, FL 322334014

**New Mailing Address:**

290 PINE STREET  
ATLANTIC BEACH, FL 32233

**FEI Number:** 59-3727792

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PORTER, ELIZABETH J  
290 PINE STREET  
ATLANTIC BEACH, FL 322334014 US

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

PORTER, ELIZABETH  
290 PINE STREET  
ATLANTIC BEACH, FL 32233 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: ELIZABETH PORTER

05/01/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PTD  
Name: PORTER, ELIZABETH  
Address: 290 PINE STREET  
City-St-Zip: ATLANTIC BEACH, FL 32233

Title: SVD  
Name: PORTER, CAROLINE D  
Address: 290 PINE STREET  
City-St-Zip: ATLANTIC BEACH, FL 32233

I hereby 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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ELIZABETH PORTER

PTD

05/01/2012

Electronic Signature of Signing Officer or Director

Date