

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000087466

FILED
Apr 30, 2009
Secretary of State

Entity Name: PORT STAFFING, INC.

Current Principal Place of Business:

1200 SERTOMA DR
TAMPA, FL 33605

New Principal Place of Business:

1800 GRANT STREET
TAMPA, FL 33605

Current Mailing Address:

1200 SERTOMA DR
TAMPA, FL 33605

New Mailing Address:

1800 GRANT STREET
TAMPA, FL 33605

FEI Number: 20-0139800

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VON SPIEGELFELD, ALLEN
501 E KENNEDY BLVD STE 1700
TAMPA, FL 33602 US

Name and Address of New Registered Agent:

MANELLI, DENNIS E VP
1800 GRANT STREET
TAMPA, FL 33605 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: DENNIS E. MANELLI

04/30/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P/D () Delete
Name: HENDRY, AARON
Address: 1200 SERTOMA DR
City-St-Zip: TAMPA, FL 33605

Title: VP () Delete
Name: WATTS, JR., CLAUDE R
Address: 1200 SERTOMA DR.
City-St-Zip: TAMPA, FL 33605

Title: S/T () Delete
Name: DEUFEL, DAVE
Address: 1200 SERTOMA DR.
City-St-Zip: TAMPA, FL 33605

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/D (X) Change () Addition
Name: HENDRY, AARON W
Address: 1800 GRANT STREET
City-St-Zip: TAMPA, FL 33605

Title: VP (X) Change () Addition
Name: WATTS, JR., CLAUDE R
Address: 1800 GRANT STREET
City-St-Zip: TAMPA, FL 33602

Title: S/T (X) Change () Addition
Name: DEUFEL, DAVE
Address: 1800 GRANT STREET
City-St-Zip: TAMPA, FL 33602

Title: VP () Change (X) Addition
Name: MANELLI, DENNIS E
Address: 1800 GRANT STREET
City-St-Zip: TAMPA, FL 33605

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

SIGNATURE: DENNIS E. MANELLI

VP

04/30/2009

Electronic Signature of Signing Officer or Director

Date