

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000003447

FILED  
Aug 27, 2007  
Secretary of State

Entity Name: PORT HOLE OF VOLUSIA, INC.

**Current Principal Place of Business:**

932 HERBERT ST  
PORT ORANGE, FL 32129

**New Principal Place of Business:**

**Current Mailing Address:**

932 HERBERT ST  
PORT ORANGE, FL 32129

**New Mailing Address:**

FEI Number: 74-3113313

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

LOWE, JULIE R  
138 CORAL STREET  
SOUTH DAYTONA, FL 32129 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: DPST ( ) Delete  
Name: LOWE, JULIE R  
Address: 138 CORAL STREET  
City-St-Zip: SOUTH DAYTONA, FL 32119

Title: DVP ( ) Delete  
Name: LOWREY, ROBERT  
Address: 1923 SPRUCE WOOD WAY  
City-St-Zip: PORT ORANGE, FL 32128

Title: V ( ) Delete  
Name: LOWE, EDWARD  
Address: 138 CORAL ST  
City-St-Zip: S DAYTONA, FL 32119

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

SIGNATURE: JULIE LOWE

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

OWNE

08/27/2007

\_\_\_\_\_ Date