

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P05000048651

1. Entity Name  
PORTERFIELD ENGINEERING, INC.



Principal Place of Business

12273 WEST EMERALD COAST PARKWAY  
SUITE 115  
MIRAMAR BEACH, FL 32550

Mailing Address

12273 WEST EMERALD COAST PARKWAY  
SUITE 115  
MIRAMAR BEACH, FL 32550

**FILED**  
**Jul 14, 2008 08:00 AM**  
**Secretary of State**



06192008 No Chg-P CR2E034 (11/05)

4. FEI Number  
20-2600609

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional  
Fee Required

**DO NOT WRITE IN THIS SPACE**

**6. Name and Address of Current Registered Agent**

PERRY, AMY A  
4477 LEGENDARY DRIVE  
202  
DESTIN, FL 32541

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

*Leslie H. Porterfield*

(NOTE: Registered Agent signature required when reinstating)

DATE

7/10/08

**FILE NOW!!! FEE IS \$150.00**  
**Due by September 12, 2008**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

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

**10. OFFICERS AND DIRECTORS**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
P  
PORTERFIELD, LESLIE H  
12273 WEST EMERALD COAST PARKWAY #115  
MIRAMAR BEACH, FL 32550

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
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TITLE  
NAME  
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CITY-ST-ZIP

**DO NOT WRITE  
IN THIS SPACE**

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07/14/08-80002-016 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Leslie H. Porterfield*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/10/08

Date

850-654-0695

Daytime Phone #