

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000096354

FILED
Apr 22, 2009
Secretary of State

Entity Name: DELLA PORTA ENTERPRISES INC.

Current Principal Place of Business:

107 TUSCANY DRIVE
ROYAL PALM BEACH, FL 33411

New Principal Place of Business:

940 SOUTH MILITARY TRAIL
UNIT #3
WEST PALM BEACH, FL 33415

Current Mailing Address:

107 TUSCANY DRIVE
ROYAL PALM BEACH, FL 33411

New Mailing Address:

FEI Number: 26-3628308 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

DELLA PORTA, PATRICK J
107 TUSCANY DRIVE
ROYAL PALM, FL 33411 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: DELLA PORTA, PATRICK J
Address: 107 TUSCANY DRIVE
City-St-Zip: ROYAL PALM BEACH, FL 33411

Title: VP () Delete
Name: EANNARINO, CINDY L
Address: 107 TUSCANY DRIVE
City-St-Zip: ROYAL PALM BEACH, FL 33411

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: PATRICK J. DELLA PORTA

PRES

04/22/2009

Electronic Signature of Signing Officer or Director

Date