

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000106630

**FILED**  
**Feb 24, 2010**  
**Secretary of State**

**Entity Name:** FLORIDA DRAWBRIDGE SERVICES, INC.

**Current Principal Place of Business:**

3170 N. FEDERAL HIGHWAY  
SUITE 116  
LIGHTHOUSE POINT, FL 33064

**New Principal Place of Business:**

1901 E. ATLANTIC BLVD  
POMPANO BEACH, FL 33060

**Current Mailing Address:**

3170 N. FEDERAL HIGHWAY  
SUITE 116  
LIGHTHOUSE POINT, FL 33064

**New Mailing Address:**

1901 E. ATLANTIC BLVD  
POMPANO BEACH, FL 33060

**FEI Number:** 26-3820583

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

PORTER, LAURA  
3170 N. FEDERAL HIGHWAY  
SUITE 116  
LIGHTHOUSE POINT, FL 33064 US

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

PORTER, LAURA  
1901 E. ATLANTIC BLVD  
POMPANO BEACH, FL 33060 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:** LAURA PORTER

02/24/2010

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** PVSD  
**Name:** PORTER, LAURA  
**Address:** 1901 E. ATLANTIC BLVD  
**City-St-Zip:** POMPANO BEACH, FL 33060

**Title:** T  
**Name:** PORTER, DANIEL  
**Address:** 1901 E. ATLANTIC BLVD  
**City-St-Zip:** POMPANO BEACH, FL 33060

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:** LAURA PORTER

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02/24/2010

Electronic Signature of Signing Officer or Director

Date