2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000000042

Entity Name: PORTCORP, INC.

FILED Apr 14, 2010 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

36627 JUDEE DR ZEPHYRHILLS, FL 33541

Current Mailing Address: New Mailing Address:

36627 JUDEE DR ZEPHYRHILLS, FL 33541

FEI Number: 26-4031591 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

PORTER, WILLIAM H 36627 JUDEE DR ZEPHYRHILLS, FL 33541 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: Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRFS

Name: PORTER, WILLIAM H 36627 JUDEE DR Address:

City-St-Zip: ZEPHYRHILLS, FL 33541 US

Title: **PRES**

Name: PORTER, WILLIAM H 36627 JUDEE DRIVE Address: ZEPHYRHILLS, FL 33541 City-St-Zip:

Title: PRFS

PORTER, WILLIAM H Name: 36627 JUDEE DRIVE Address: City-St-Zip: ZEPHYRHILLS, FL 33541

Title: **PRES**

PORTER, WILLIAM H Name: Address: 36627 JUDEE DRIVE City-St-Zip: ZEPHYRHILLS, FL 33541

Title: **PRES**

Name: PORTER, WILLIAM H 36627 JUDEE DRIVE Address: City-St-Zip: ZEPHYRHILLS, FL 33541

Title: **PRES**

Name: PORTER, WILLIAM H Address: 36627 JUDEE DRIVE City-St-Zip: ZEPHYRHILLS, FL 33541

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: WHP **PRES** 04/14/2010