

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P34558

FILED
Jan 23, 2008
Secretary of State

Entity Name: PORT CITY INDUSTRIAL AND MARINE SUPPLY, INC.

Current Principal Place of Business:

1250 W. BAY ST
SAVANNAH, GA 31415

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 1407
SAVANNAH, GA 31402

New Mailing Address:

FEI Number: 58-1359434

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HORSFALL, JAMES
3606 JOSE TERRACE
JACKSONVILLE, FL 32217 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: DCP () Delete
Name: FARRELL, CHARLES W.,
Address: 1250 WEST BAY ST.
City-St-Zip: SAVANNAH, GA

Title: D () Delete
Name: FARRELL, CHARLES W.,
Address: 1250 WEST BAY ST.
City-St-Zip: SAVANNAH, GA

Title: S () Delete
Name: BEESON, SALLY,
Address: 1250 WEST BAY ST.
City-St-Zip: SAVANNAH, GA

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DCP (X) Change () Addition
Name: FARRELL, CHARLES W.,
Address: 1250 WEST BAY ST.
City-St-Zip: SAVANNAH, GA 31402

Title: D (X) Change () Addition
Name: FARRELL, CHARLES W.,
Address: 1250 WEST BAY ST.
City-St-Zip: SAVANNAH, GA 31402

Title: S (X) Change () Addition
Name: BEESON, SALLY,
Address: 1250 WEST BAY ST.
City-St-Zip: SAVANNAH, GA 31402

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: CHARLES W. FARRELL

Electronic Signature of Signing Officer or Director

OWNE

01/23/2008

Date