

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000061140

FILED
Jan 11, 2009
Secretary of State

Entity Name: PORTFOLIO MANAGEMENT / GIBBONE, INC.

Current Principal Place of Business:

10265 NW 129TH ST
HIALEAH GARDENS, FL 33016

New Principal Place of Business:

Current Mailing Address:

10265 NW 129TH ST
HIALEAH GARDENS, FL 33016

New Mailing Address:

FEI Number: 65-0601205

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HENRY, JANET
10265 NW 129TH ST
HIALEAH GARDENS, FL 333016 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: PT () Delete
Name: GIBBONE, STEVEN D
Address: 90 WATSON DRIVE
City-St-Zip: MOUNT LAUREL, NJ 08054

Title: S () Delete
Name: SCICCHITANO, VERONICA
Address: 10265 NW 129TH STREET
City-St-Zip: HIALEAH, FL 33016

Title: V () Delete
Name: SCHERZER, HAROLD
Address: 1548 FULTON DR
City-St-Zip: AMBLER, PA 19002

Title: V () Delete
Name: HENRY, JANET
Address: 10265 NW 129TH STREET
City-St-Zip: HIALEAH, FL 33016

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: STEVE GIBBONE

PT

01/11/2009

Electronic Signature of Signing Officer or Director

_____ Date