

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000104371

Entity Name: DEVELOPORT, INC.

FILED
Mar 25, 2010
Secretary of State

Current Principal Place of Business:

1510 S.E. 17TH STREET
SUITE 400-A
FORT LAUDERDALE, FL 33316 US

Current Mailing Address:

1510 S.E. 17TH STREET
SUITE 400-A
FORT LAUDERDALE, FL 33316 US

FEI Number: 65-0809172

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCCRORY, J. WALTER
1510 S.E. 17TH STREET
SUITE 400-A
FORT LAUDERDALE, FL 33316 US

New Principal Place of Business:

1900 S.E. 15TH STREET
SUITE 6
FORT LAUDERDALE, FL 33316 US

New Mailing Address:

1900 S.E. 15TH STREET
SUITE 6
FORT LAUDERDALE, FL 33316 US

Name and Address of New Registered Agent:

MCCRORY, J. WALTER
1900 S.E. 15TH STREET
SUITE 6
FORT LAUDERDALE, FL 33316 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: J. WALTER MCCRORY

03/25/2010

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP
Name: MCCRORY, J. WALTER
Address: 1900 S.E. 15TH STREET
City-St-Zip: FORT LAUDERDALE, FL 33316

Title: D
Name: PELSUE, BRADLEY
Address: 2500 S TEJON STREET
City-St-Zip: ENGLEWOOD, CO 80110

Title: DS
Name: MOSS, BOB L
Address: 625 THIRD KEY DRIVE
City-St-Zip: FORT LAUDERDALE, FL 33304

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: J. WALTER MCCRORY

DP

03/25/2010

Electronic Signature of Signing Officer or Director

Date