

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000008929

FILED  
Jan 08, 2004  
Secretary of State

**Entity Name:** PORTFOLIO PROPERTY SERVICES, INC.

**Current Principal Place of Business:**

102 E BROADWAY PO BOX 34134  
EVERGLADES CITY, FL 34139

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 530  
102 EAST BROADWAY  
EVERGLADES CITY, FL 34139

**New Mailing Address:**

**FEI Number:** 59-3488394      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

GEORGE, DAVID L  
102 EAST BROADWAY  
APT 101  
EVERGLADES CITY, FL 34139

**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:** D      ( ) Delete  
**Name:** GEORGE, DAVID L  
**Address:** 102 E BROADWAY PO BOX 530  
**City-St-Zip:** EVERGLADES CITY, FL 34139

**Title:** D      ( ) Delete  
**Name:** BENNETT, MARGETT A  
**Address:** 102 E BROADWAY PO BOX 530  
**City-St-Zip:** EVERGLADES CITY, FL 34139

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

**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 for the exemption stated in Section 119.07(3)(i), 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:** D.GEORGE

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

MR

01/08/2004

\_\_\_\_\_  
Date