

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000062434

FILED
Apr 10, 2009
Secretary of State

Entity Name: NORTHPORT PROPERTIES, INC.

Current Principal Place of Business:

200 E GOVERNMENT
BOX 18
PENSACOLA, FL 32501

New Principal Place of Business:

200 E GOVERNMENT
SUITE 240-D
PENSACOLA, FL 32502

Current Mailing Address:

200 E GOVERNMENT
240-D
PENSACOLA, FL 32501

New Mailing Address:

200 E GOVERNMENT
240-D
PENSACOLA, FL 32502

FEI Number: 59-3587983

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPENCER, BRIAN K
200 E GOVERNMENT ST
BOX 18
PENSACOLA, FL 32501 US

Name and Address of New Registered Agent:

SPENCER, BRIAN K
200 E GOVERNMENT ST
SUITE 240-D
PENSACOLA, FL 32502 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: BRIAN K. SPENCER

04/10/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SPENCER, BRIAN K
Address: 17 E MAIN STREET, STE 100
City-St-Zip: PENSACOLA, FL 32501

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SPENCER, BRIAN K
Address: 17 E MAIN STREET, STE 100
City-St-Zip: PENSACOLA, FL 32502

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: BRIAN K. SPENCER

PD

04/10/2009

Electronic Signature of Signing Officer or Director

Date