

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S46580

Entity Name: PORTMAN PLAZA, INC.

FILED  
Mar 01, 2012  
Secretary of State

**Current Principal Place of Business:**

2085 A1A SOUTH  
STE 101  
ST AUGUSTINE, FL 32084 US

**New Principal Place of Business:**

**Current Mailing Address:**

304 OLD PLANTATION DRIVE  
SAINT AUGUSTINE, FL 32086

**New Mailing Address:**

FEI Number: 59-3066175      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

ALEXANDER, STEPHEN J  
19 OLD MISSION AVE  
SAINT AUGUSTINE, FL 32084 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

**OFFICERS AND DIRECTORS:**

Title: DP  
Name: PORTMAN, WARREN C.  
Address: 304 OLD PLANTATION DR  
City-St-Zip: ST. AUGUSTINE, FL 32086

Title: VP  
Name: PORTMAN, ERROL  
Address: 2815 SW 15TH STREET  
City-St-Zip: MIAMI, FL 33145

Title: ST  
Name: PORTMAN, LORRAINE  
Address: 304 OLD PLANTATION DR  
City-St-Zip: ST AUGUSTINE, FL 32086

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: LORRAINE PORTMAN

ST

03/01/2012

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

\_\_\_\_\_ Date