

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **V72308**

1. Corporation Name

PORTAGE TRADE DEVELOPMENT, INC.

Principal Place of Business

**2473 KINGFISHER LANE
SUITE 1-202
CLEARWATER FL 34622**

Mailing Address

**2473 KINGFISHER LANE
SUITE 1-202
CLEARWATER FL 34622**

FILED
Jul 19, 1999 8:00 am
Secretary of State

07-19-1999 90003 008 ***150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/19/1992

4. FEI Number

59-3149213

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Election Campaign Financing



\$5.00 May Be
Added to Fees

8. This corporation owes the current year
Intangible Personal Property.



Yes ☒ No

2. Principal Place of Business

21 337 LAHACIENDA DRIVE

2a. Mailing Address

26 SAME

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

23 INDIAN ROCKS BEACH FLORIDA

City & State

27

Zip

24 33785

Country

25 USA

Zip

29

Country

30

9. Name and Address of Current Registered Agent

**LUSK, MARLENE R
2473 KINGFISHER LANE
SUITE 1-202
CLEARWATER FL 34622**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

337 LAHACIENDA DRIVE

83

84

City **INDIAN ROCKS BEACH FL**

85 Zip Code

33785

11. Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes.

SIGNATURE

M. Lusk

Signature, typed or printed name, of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

**P
NAME LUSK, MARLENE R
STREET ADDRESS 2473 KINGFISHER LANE, #1-202
CITY-ST-ZIP CLEARWATER FL 34622**

TITLE ☒ DELETE

**S
NAME LUSK, RETA
STREET ADDRESS 2473 KINGFISHER LANE, #1-202
CITY-ST-ZIP CLEARWATER FL 34622**

TITLE ☒ DELETE

**V
NAME LUSK, SHERRY
STREET ADDRESS 2473 KINGFISHER LANE, #1-202
CITY-ST-ZIP CLEARWATER FL 34622**

TITLE ☐ DELETE

**T
NAME LUSK, MARLENE R
STREET ADDRESS 2473 KINGFISHER LANE, #1-202
CITY-ST-ZIP CLEARWATER, FL 34622**

TITLE ☐ DELETE

**NAME
STREET ADDRESS
CITY-ST-ZIP**

TITLE ☐ DELETE

**NAME
STREET ADDRESS
CITY-ST-ZIP**

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

M. Lusk SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

July 9/99 727-593-2763
Date Daytime Phone #

CR2E034 (5/99)

0092536

PORTAGE TRADE DEVELOPMENT, INC.,
2473 Kingfisher Lane, Suite 1202,
Clearwater, Florida. 34622

590152-90003-8
V72308

Telephone: (813) 572-0665

July 9, 1999.

Division of Corporations,
Annual Reports Filings,
P.O. Box 1500,
Tallahassee, Florida. 32302-1500

Dear Sir or Madam:

I am in receipt of your 2nd Notice of the 1999 Profit Corporation Annual Report Packet, of which I received today, July 9, 1999. After receiving this 2nd Notice today I telephoned your offices to advise that this is the first notice I have received and explained that the Corporation moved and put in a change of address on December 31, 1998 with the Post Office to: (your office suggested that I send the \$150.00 check and letter requesting a one time exception)

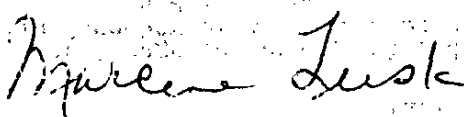
337 La Hacienda Drive,
Indian Rocks Beach, Florida. 33785

Even though the change of address was given to the Post Office in December of last year we are still not having the mail forwarded and we have had insurance policies expire and cancelled even before we received the billing, and our bank statements have to be mailed twice.

Because of the information noted above I am making a one time request for you accept the enclosed \$150.00 check as full payment for 1999. You will note upon looking at our file that the Corporation has never been late before and would not have been late this time if we had received the information. I am so very angry with the Post Office and have made numerous complaints but nothing seems to get any better.

I appreciate your assistance in this regard.

Sincerely,



Marlene R. Lusk.

MRL:mrl
Encl.