

1.) CORPORATION NAME:

**C-PORT, INCORPORATED**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **B.E. AUTH IN VI POTOMAC MARINE, INC. 16229 NEABSCO ROAD WOODBRIDGE, VA 22191**

DUE DATE: **10/29/2010**

SCC ID NO: **05859707**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
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3.) CITY OR COUNTY OF VA REGISTERED OFFICE:  
**PRINCE WILLIAM COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:  
**VA**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1900 OCEANWALK LANE SUITE 133

CITY/ST/ZIP: POMPANO BEACH, FL 33062-

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME: T. J. BUHITE, JR.  
TITLE: VICE CHAIRMAN  
ADDRESS: 114 CARROLL ISLAND RD  
CITY/ST/ZIP/CO: BALTIMORE, MD 21220-

OFFICER  DIRECTOR

NAME: CHRIS SHAFFNER  
TITLE: CHAIRMAN  
ADDRESS: PO BOX 530518  
CITY/ST/ZIP/CO: LAKE PARK, FL 33403-

OFFICER  DIRECTOR

NAME: TINA CARDONE  
TITLE: DIRECTOR  
ADDRESS: 1900 OCEANWALK LANE SUITE 133  
CITY/ST/ZIP/CO: POMPANO BEACH, FL 33062-

OFFICER  DIRECTOR

NAME: STEVE WINKLER  
TITLE: TREASURER  
ADDRESS: 256 MARGINAL STREET SUITE 12  
CITY/ST/ZIP/CO: EAST BOSTON, MA 02128-

OFFICER  DIRECTOR

NAME: JOHN ANDREWS  
TITLE: DIRECTOR  
ADDRESS: 60 REYNOLDS ST  
CITY/ST/ZIP/CO: WICKFORD, RI 02852-

OFFICER  DIRECTOR

NAME: JOE FROHNHOEFER TITLE: DIRECTOR ADDRESS: 700 HUMMEL AVE CITY/ST/ZIP/CO: SOUTHOLD, NY 11971-	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
NAME: CHARLES MEYER TITLE: DIRECTOR ADDRESS: PO BOX 1402 CITY/ST/ZIP/CO: LAKE OZARK, MO 65049-	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
NAME: ROGER SLADE TITLE: DIRECTOR ADDRESS: PO BOX 568 CITY/ST/ZIP/CO: PORT HADLOCK, WA 98339-	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
NAME: CHRIS MCCARTHY TITLE: DIRECTOR ADDRESS: 16400 PCH SUITE 222 CITY/ST/ZIP/CO: HUNTINGTON BEACH, CA 92649-	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
NAME: KEVIN FREESTONE TITLE: DIRECTOR ADDRESS: PO BOX 431854 CITY/ST/ZIP/CO: BIG PINE KEY, FL 33043-	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
NAME: PHIL DELANO TITLE: DIRECTOR ADDRESS: PO BOX 2169 CITY/ST/ZIP/CO: BETHEL ISLAND, CA 94511-	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
NAME: ETHAN MAASS TITLE: SECRETARY ADDRESS: PO BOX 429 CITY/ST/ZIP/CO: GREEN HARBOR, MA 02041-	<input checked="" type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.	
<u>/s/ TINA CARDONE</u> SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	<u>TINA CARDONE, DIRECTOR</u> PRINTED NAME AND CORPORATE TITLE
<u>10/22/2010</u> DATE	
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.	