

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F63545

FILED  
Mar 24, 2009  
Secretary of State

Entity Name: PUTNAM WELL DRILLING, INC.

## Current Principal Place of Business:

661-3 AVE  
WELAKA, FL 321931027

## New Principal Place of Business:

661-3RD AVE  
WELAKA, FL 321931027

## Current Mailing Address:

HWY. 309  
P.O. BOX 1027  
WELAKA, FL 321931027

## New Mailing Address:

P O BOX 1027  
WELAKA, FL 32193

FEI Number: 59-3017692

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HOLMES, DONALD E.  
222 N THIRD STREET  
PALATKA, FL 32177 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: WINKLEMAN, GUY T  
Address: 141 E. END RD.  
City-St-Zip: SAN MATEO, FL 32187

Title: VD ( ) Delete  
Name: WINKLEMAN, TONY J  
Address: 516 - 3 AVE  
City-St-Zip: SATSUMA, FL 32189

Title: SD ( ) Delete  
Name: WINKLEMAN, GUY H  
Address: 284 POMONA LANDING ROAD  
City-St-Zip: WELAKA, FL 32193

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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 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: GUY T. WINKLEMAN

PRES

03/24/2009

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

\_\_\_\_\_  
Date