

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 556642

FILED
Jan 07, 2009
Secretary of State

Entity Name: PUTNAM GROVES, INC.

Current Principal Place of Business:

2310 80 FT RD
P.O. BOX 1400
BARTOW, FL 33830

New Principal Place of Business:

2310 EIGHTY FOOT ROAD
BARTOW, FL 33830

Current Mailing Address:

2310 80 FT RD
P.O. BOX 1400
BARTOW, FL 33830

New Mailing Address:

POST OFFICE BOX 1400
BARTOW, FL 33831

FEI Number: 59-1792759

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PUTNAM, WM. D II
2240 HELEN CIR. E
BARTOW, FL 33830 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: PUTNAM, WM. DUDLEY I, I
Address: 2240 HELEN CIRCLE E
City-St-Zip: BARTOW, FL 33830

Title: D () Delete
Name: PUTNAM, SARA H
Address: 2240 HELEN CIR. E
City-St-Zip: BARTOW, FL 33830

Title: VD () Delete
Name: PUTNAM, WILLIAM DUDLEY
Address: 1710 MARIPOSA AVENUE
City-St-Zip: BARTOW, FL 33830

Title: TD () Delete
Name: SPINOSA, GHIA P
Address: 490 E HOOKER ST
City-St-Zip: BARTOW, FL 33830

Title: SD () Delete
Name: PUTNAM, ABEL A
Address: 1330 1ST AVE S
City-St-Zip: BARTOW, FL 33830

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:

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: GHIA PUTNAM SPINOSA

TD

01/07/2009

Electronic Signature of Signing Officer or Director

Date