

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000014956

FILED
Apr 30, 2008
Secretary of State

Entity Name: PUTNAM PROPERTIES LLC

Current Principal Place of Business:

956 ESTON STREET
CAMARILLO, CA 93010

New Principal Place of Business:

Current Mailing Address:

956 ESTON STREET
CAMARILLO, CA 93010

New Mailing Address:

FEI Number: 74-3132199

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PUTNAM, RODGER
2609 PIRATES BAY DR.
FERNANDINA BEACH, FL 32034 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

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: PUTNAM, TODD
Address: 956 ESTON ST
City-St-Zip: CAMARILLO, CA 93010

Title: MGRM () Delete
Name: PUTNAM, RODGER
Address: 2609 PIRATES BAY DR
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: MGR () Delete
Name: PUTNAM, ROGER
Address: 54 CEDAR DR
City-St-Zip: CAMARILLO, CA 93010

Title: MGR () Delete
Name: PUTNAM, PATRICIA
Address: 54 CEDAR DR
City-St-Zip: CAMARILLO, CA 93010

ADDITIONS/CHANGES:

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: TODD PUTNAM

MGRM

04/30/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date