

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 30, 2008 08:00 AM
Secretary of State

DOCUMENT # P01000116466

1. Entity Name
PIUTE PROPERTY, INC.



Principal Place of Business
5551 RIDGEWOOD DRIVE
SUITE 501
NAPLES, FL 34108

Mailing Address
5551 RIDGEWOOD DRIVE
SUITE 501
NAPLES, FL 34108



04252008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 94-3414588	Applied For Not Applicable
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5. Certificate of Status Desired ☒ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

BUDD, DAVID G
5551 RIDGEWOOD DRIVE
SUITE 501
NAPLES, FL 34108

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

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

(NOTE: Registered Agent signature required when reinstating)

DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

U000000938254
05/27/08-80083-008 158.75

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY- ST- ZIP	VS BUDD, DAVID G 5551 RIDGEWOOD DRIVE SUITE 501 NAPLES, FL 34103
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TITLE NAME STREET ADDRESS CITY- ST- ZIP	DPT STARMAN, SHELDON W 4099 TAMiami TrL N STE 400 NAPLES, FL 34103
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TITLE NAME STREET ADDRESS CITY- ST- ZIP	V DAVIS, JULIA M 9201 W. OLYMPIC BLVD., STE. 200 BEVERLY HILLS, CA 90212
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TITLE NAME STREET ADDRESS CITY- ST- ZIP	AS LAPIN, DAVID A 9201 W. OLYMPIC BLVD. STE. 200 BEVERLY HILLS, CA 90212
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TITLE NAME STREET ADDRESS CITY- ST- ZIP	
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TITLE NAME STREET ADDRESS CITY- ST- ZIP	
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**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-25-08 239514-1000

Date

Daytime Phone #

DAVID G BUDD, VICE PRESIDENT