


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 23, 2007 8:00 am
Secretary of State

03-23-2007 90006 001 ***158.75

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| DOCUMENT # P06000106107 |  |
| 1. Entity Name MARC B. PUTTERMAN & ASSOCIATES, INC. | |

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| Principal Place of Business 4095 STATE ROAD 7 SUITE L155 LAKE WORTH, FL 33467 US | Mailing Address 4095 STATE ROAD 7 SUITE L155 LAKE WORTH, FL 33467 US |
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| 2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc. City & State Zip Country | 3. Mailing Address Suite, Apt. #, etc. City & State Zip Country |
|---|---|

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03132007 Chg-P CR2E034 (12/06)

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| 4. FEI Number 20-5373080 | Applied For <input type="checkbox"/> Not Applicable |
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| 5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required |
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| 6. Name and Address of Current Registered Agent PUTTERMAN, MARC B 12486 EQUINE LANE WELLINGTON, FL 33414 | 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code |
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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

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| FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees |
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| 10. OFFICERS AND DIRECTORS | | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 | |
|--|--|--|--|
| TITLE P | <input type="checkbox"/> Delete PUTTERMAN, MARC B 12486 EQUINE LANE WELLINGTON, FL 33414 | TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition | |
| TITLE VP | <input type="checkbox"/> Delete PUTTERMAN, JACQUELINE M 12486 EQUINE LANE WELLINGTON, FL 33414 | TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition | |
| TITLE TRES | <input type="checkbox"/> Delete PUTTERMAN, JACQUELINE M 12486 EQUINE LANE WELLINGTON, FL 33414 | TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition | |
| TITLE SEC | <input type="checkbox"/> Delete PUTTERMAN, MARC B 12486 EQUINE LANE WELLINGTON, FL 33414 | TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition | |
| TITLE <input type="checkbox"/> Delete | | TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition | |
| TITLE <input type="checkbox"/> Delete | | TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition | |

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 another duly empowered.

SIGNATURE:  **3-23-07 561-333-9547**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #