PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

1999 DOCUMENT # P94000091306

PUTTICK VENTURES, INC.

FILED Jul 08, 1999 8:00 am Secretary of State

07-08-1999 90021 007 ***550.00

Principal Place of Business Mailing Address 101 S. U.S. HWY. 1 1401 U.S. HWY 1 ERO BEACH FL 32960 VERO BEACH FL 32960 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/19/1994 . Principal Place of Business 4. FEI Number 2a. Mailing Address Applied For 65-0546991 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 27 Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing Added to Fees 28 Trust Fund Contribution Zip Country Zio Country 8. This corporation owes the current year Yes 29 25 30 Intangible Personal Property. 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name CALDWELL, WILLIAM W 82 Street Address (P.O. Box Number is Not Acceptable) 756 BEACHLAND BLVD. VERO BEACH FL 32963 83 84 City Zip Code Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes. **IGNATURE** Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. LΕ 1.1 TITLE DELETE Change Addition PUTTICK, KENNETH G Æ 1.2 NAME 1401 S. U.S. HWY. 1 1.3 STREET ADDRESS **EET ADDRESS** VERO BEACH FL 32960 1.4 CITY-ST-ZIP Y-ST-ZIP ,ε DELETE 2.1 TITLE Change 2.2 NAME 2.3 STREET ADDRESS **EET ADDRESS** /-ST-ZIP 2.4 CITY-ST-ZIP DELETE 3.1 TITLE Change Addition ŀΕ 3 2 NAME FET ADDRESS 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP -ST-ZIF 4.1 TITLE DELETE Change Addition 4.2 NAME ET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZiP -ST-ZIP 517ITE DELETE Change Addition 5.2 NAME 5.3 STREET ADDRESS **ET ADDRESS** 5.4 CITY-ST-ZIP DELETE 6.1 TITLE ☐ Change ☐ Addition 6.2 NAME **ET ADDRESS** 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in section 119.07(3)(i), Florida Statutes. I further certify that the information adicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR