

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 06, 2002 8:00 am**  
**Secretary of State**

05-06-2002 90014 001 \*\*\*450.00

**DOCUMENT # P97000103769**

1. Entity Name

**PUTNAM LEASING COMPANY B, INC.**

Principal Place of Business

**16313 N DALE MABRY HWY  
TAMPA FL 33618**

Mailing Address

**PO BOX 272000  
TAMPA FL 33688-2000**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

**59-3481523**

Applied For

Not Applicable

Zip

Country

Zip

Country

**US**

5. Certificate of Status Desired

**\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**MIDULLA, RICHARD J**

**16313 N DALE MABRY HWY**

**TAMPA FL 33618**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2002 Fee will be \$550.00  
Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution.

**\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PD** ☐ Delete  
NAME **MIDULLA, RICHARD J**  
STREET ADDRESS **16313 N DALE MABRY HWY**  
CITY-ST-ZIP **TAMPA FL 33618**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE **D** ☐ Delete  
NAME **PHILLIPS, WILLIAM C**  
STREET ADDRESS **225 WEST WALKER DRIVE**  
CITY-ST-ZIP **KEYSTONE HEIGHTS FL 32656**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE **S** ☐ Delete  
NAME **WOODBURY, TIMOTHY S**  
STREET ADDRESS **16313 N DALE MABRY HWY**  
CITY-ST-ZIP **TAMPA FL 33618**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE **V** ☐ Delete  
NAME **SHEARER, STEVEN R**  
STREET ADDRESS **16313 N DALE MABRY HWY**  
CITY-ST-ZIP **TAMPA FL 33618**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE **T** ☐ Delete  
NAME **GEERAERTS, JOHN J**  
STREET ADDRESS **16313 N DALE MABRY HWY**  
CITY-ST-ZIP **TAMPA FL 33688**

TITLE ☒ Change ☐ Addition  
NAME **GEERAERTS, JOHN W**  
STREET ADDRESS **16313 N DALE MABRY HWY**  
CITY-ST-ZIP **TAMPA FL 33618**

TITLE **D** ☐ Delete  
NAME **SHEPPARD, WILSON**  
STREET ADDRESS **293 SOUTH US 301**  
CITY-ST-ZIP **SUMTERVILLE FL 33585**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. 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 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 11, or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

**SIGNATURE REQUIRED**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**JOHN W. GEERAERTS**

**4/25/2002**

**(813)963-0994**

Date

Daytime Phone #

CR2E034 (9/01)

# Attachment

PUTNAM LEASING COMPANY B INC.  
16313 N. DALE MABRY HIGHWAY  
TAMPA, FLORIDA 33618

DOCUMENT#P97000103769

## 12. NAMES AND STREET ADDRESSES OF EACH OFFICER AND DIRECTOR (CONTINUED)

<u>TITLE</u>	<u>NAMES OF OFFICERS AND DIRECTORS</u>	<u>STREET ADDRESS OF EACH OFFICER AND DIRECTOR</u>	<u>CITY, STATE, ZIP</u>
D	JOHN DRAKE	1190 U.S.HIGHWAY 27 EAST	MOOREHAVEN, FL 33471
D	WILLIAM T. MULCAY JR.	US HIGHWAY 17 NORTH	WAUCHULA, FL 33873