

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
May 17, 1999 8:00 am  
Secretary of State

05-17-1999 90028 048 \*\*\*150.00

DOCUMENT # P97000103783 ✓OK

1. Corporation Name

PUTNAM LEASING COMPANY C, INC.

Principal Place of Business

%RICHARD J MIDULLA  
16313 N DALE MABRY HIGHWAY  
TAMPA, FL 33618

Mailing Address

P.O. BOX 272000  
TAMPA, FL 33688-2000

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/08/97

4. FEI Number  
59-3481524

Applied For  
Not Applicable

2. Principal Place of Business

21 Suite, Apt. #, etc.

2a. Mailing Address

26 Suite, Apt. #, etc.

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

23 City & State

28 City & State

6. Election Campaign Financing  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

24 Zip Country 25 Country 29 Zip Country 30

8. This corporation owes the current year Intangible  
Personal Property Tax. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

MIDULLA, RICHARD J  
16313 NORTH DALE MABRY HWY  
TAMPA, FL 33618

11. 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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P / D ☐ DELETE  
NAME MIDULLA, RICHARD J  
STREET ADDRESS 16313 N DALE MABRY HWY  
CITY-ST-ZIP TAMPA, FL 33618

1.1 TITLE ☐ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME DUREN, JAMES R  
STREET ADDRESS 16313 N DALE MABRY HWY  
CITY-ST-ZIP TAMPA FL 33618

2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

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

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

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

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME AS  
STREET ADDRESS GEERAERTS, JOHN W  
CITY-ST-ZIP 16313 N DALE MABRY HWY  
TAMPA FL 33618

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME D  
STREET ADDRESS RIVENBARK, BENNIE M  
CITY-ST-ZIP 14651 21ST ST  
DADE CITY FL 33535

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. 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 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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JOHN W GEERAERTS

04726/99

(813)963-0994

Date

Daytime Phone #

CR2E034 (11/98)

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

553531-90028-48  
P97000103783

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	WILSON SHEPPARD	US HIGHWAY 301 AT 471	SUMTERVILLE, FL 33585
D	JOHN DRAKE	HIGHWAY 27 SOUTH	MOOREHAVEN, FL 33471
D	WILLIAM T. MULCAY JR.	US HIGHWAY 17 NORTH	WAUCHULA, FL 33873