

FILED
Apr 15, 2003 8:00 am
Secretary of State

04-15-2003 90108 013 ***150.00

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P98000074687

#9529-1



1. Entity Name
PUTTERS III, INC.

Principal Place of Business
240 SO. PINEAPPLE AVE
SARASOTA, FL 34236

Mailing Address
240 SO. PINEAPPLE AVE
SARASOTA, FL 34236

2. Principal Place of Business
240 So. Pineapple Ave
Suite, Apt. #, etc.
10th Floor

3. Mailing Address
240 So. Pineapple Ave
Suite, Apt. #, etc.
10th Floor

City & State
Sarasota, FL

City & State
Sarasota, FL

4. FEI Number
65-0865979

Applied For
Not Applicable

Zip
34236

Country

Zip
34236

Country

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BAND, DAVID S
240 SO. PINEAPPLE AVE
SARASOTA, FL 34236

7. Name and Address of New Registered Agent

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. 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 resigning)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D ☐ Delete
NAME BAND, DAVID S
STREET ADDRESS 240 SO. PINEAPPLE AVE
CITY-ST-ZIP SARASOTA, FL 34236

TITLE D ☐ Delete
NAME KANE, DANIEL
STREET ADDRESS 1127 WESTWAY DRIVE
CITY-ST-ZIP SARASOTA, FL 34236

TITLE D ☐ Delete
NAME KALIN, EDWARD
STREET ADDRESS 5252 SO. TAMiami TRAIL
CITY-ST-ZIP SARASOTA, FL 34231

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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

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

12. 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 807, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with another line empowered.

SIGNATURE:

David S. Band, Director 03/17/03

941-366-6660

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)