PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

May 06, 1999 8:00 am Secretary of State

05-06-1999 90192 025 ***150.00

DOCUMENT # P98000091123

1. Corporation Name

PUTTERS & STRUTTERS, INC.

Principal	Place	of	Business
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Mailing Address

1713 CHAPEL TREE CIRCLE, APT G

1713 CHAPEL TREE CIRCLE. APT G

1 (66)(65) (16 (6)6) (10)	 	010 11000 titt 1001

BHANDON FL 333	L 33311 BHANDON FE 33311			DO NOT WRITE IN THIS SPACE		
				3. Date Incorporated or Qualifed		
				10/23/1998		
2. Principal Place	e of Business UNTERS LAKE DL	2a. Mailing Address 26 8801 HUNTE	RELAKE DR	4. FEI Number 9/1/92/0036		ied For Applicable
Suite, Apt. #, 6	etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Add Fee Requ	
City & State		City & State		6. Election Campaign Financing	\$5.00 M	ay Be
23 TAM	PA, FC	28 TAMPA, FU	L	Trust Fund Contribution	Added to I	Fees
Zip 3364	Country 7 25 USA	^{Zip} 33647 30	Country LLSA	This corporation owes the current year Personal Property Tax.		No
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Register	ed Agent	
DI ACT	OW DOUGLAS F		81 Name	IGUAS E PLASTOW		
	OW, DOUGLAS E CHAPEL TREE CIRCLE, APT G			dress (P.O. Box Number is Not Acceptable)		
	OON FL 33511		8501	HUNTERS LAKE DR		
UINIU	7011 L 33011		83 #S	516		
			84 City	nfa F	85 Zip Co	de/7
44 Dureuant to	the provisions of Sections 607 0502	and 607 1508. Florida Statutes	the shove named cor	moration submits this statement for the nurnose	of changing its re	gistered
office or real	istered agent, or both, in the State of	Florida, Such change was auth	norized by the corporat	tion's board of directors. I hereby accept the ap	pointment as regis	stered
3	familiar with, and accept the obligation		a statutes.	E Alaston 4-	27-99	
SIGNATURE SIGNATURE	DOUGLAS & PLA inature, typed or printed name of registered agent a	95 TO US and title if applicable. (NOTE: Re	egistered Apont signature requir	red when reinstating) DATE	<u> </u>	<u> </u>
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS		
TITLE	_	☐ DELETE	1.1 TITLE	of a second	Change	☐ Addition
NAME			1.2 NAME	DOUGLAS E PLASTON	no 45	16
STREET ADDRESS			1.3 STREET ADDRESS	8801 HUNTERS LAKE L TAMPA, FL 33647	1 4F31	
CITY-ST-ZIP			1.4 CITY-ST-ZIP	TAMPA, FL 33641	Change	Addition
TITLE		☐ DELETE	2.1 TITLE		∐ Change	☐ Applipor
NAME			2.2 NAME			
STREET ADDRESS			2.3 STREET ADDRESS			
CITY-ST-ZIP		() DELETE	2. 4 CiTY-ST-ZIP		☐ Change	Addition
TITLE		☐ DELET£	3.1 TITLE		_] Onlinge	
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS			
CITY-ST-ZIP TITLE		☐ DELETE	3.4. CITY-ST-ZIP		Change	☐ Addition
NAME			4.2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY-ST-ZIP			
TITLE		☐ DELETE	5.1 TITLE		Change	Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY-ST-ZIP			
TITLE		☐ DELETE	6.1 TITLE		☐ Change	☐ Addition
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			
CITY-ST-ZIP			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: