

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 18, 2006 8:00 am
Secretary of State

08-18-2006 90077 026 ***150.00

DOCUMENT # S98345
 1. Entity Name
PUTNAL GROVES, INC.



Principal Place of Business Mailing Address
 10755 RUSS RD 10755 RUSS RD
 MYAKKA CITY, FL 34251 MYAKKA CITY, FL 34251

50025525



07072006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0301024	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 PUTNAL, R. RUSS
 10755 RUSS RD.
 MYAKKA CITY, FL 34251

DO NOT WRITE IN THIS SPACE

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: *R Russ Putnal* DATE: 8-11-06

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
Due by September 6, 2006

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PUTNAL, R. RUSS 10755 RUSS RD. MYAKKA CITY, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Assistant manager Dixie Nesland 28950 Singletary Rd. Myakka City, FL 34251
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Assistant manager Zach Putnal 10755 Russ Rd. Myakka City, FL 34251
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *R Russ Putnal* DATE: 8-11-06 Daytime Phone # _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR