

**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
**10755 RUSS RD
MYAKKA CITY, FL 34251**

Mailing Address
**10755 RUSS RD
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 ☐

\$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

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

(NOTE: Registered Agent signature required when reinstating)

8-11-06

DATE

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

**DO NOT WRITE
IN THIS SPACE**

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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8-11-06

Date

Daytime Phone #