

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 125845 (8)

1. Corporation Name
CLERMONT GROVES, INC.



Principal Place of Business: 13100 W COPLONIAL DR. WINTER GARDEN FL 34787 US
Mailing Address: PO BOX 770338 WINTER GARDEN FL 34777-0338 US

3. Date Incorporated or Qualified: 02/08/1932
3a. Date of Last Report: 04/11/1995
4. FEI Number: 59-0623328
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

2. Principal Place of Business (21) Suite, Apt. #, etc. (22) City & State (23) Zip (24) Country (25)
2a. Mailing Address (26) Suite, Apt. #, etc. (27) City & State (28) Zip (29) Country (30)

9. Name and Address of Current Registered Agent
**MCPHERSON, REX V
2029 COMPANERO AVE.
ORLANDO FL 32804**

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

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: _____ DATE: _____
Signature typed or printed name of registered agent and the corporation (if not the Registered Agent) when registered when registering

12. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> DELETE
NAME	RODEN, LAURA D	
STREET ADDRESS	2696 SW GREENWICH WAY	
CITY- ST- ZIP	PALM CITY FL	
TITLE	PD	<input type="checkbox"/> DELETE
NAME	MCPHERSON, REX V	
STREET ADDRESS	2029 COMPANERO AVE.	
CITY- ST- ZIP	ORLANDO, FL 00000	
TITLE	D	<input type="checkbox"/> DELETE
NAME	GERBER, KEENE M	
STREET ADDRESS	1453 KING CT	
CITY- ST- ZIP	WINTER SPRINGS FL	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	MCPHERSON, JOHN R	
STREET ADDRESS	1110 W IVANHOE BLVD 15	
CITY- ST- ZIP	ORLANDO FL	
TITLE	STD	<input type="checkbox"/> DELETE
NAME	RIFFLE, THOMAS R	
STREET ADDRESS	4826 HURDLE CT	
CITY- ST- ZIP	ORLANDO FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY- ST- ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY- ST- ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY- ST- ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY- ST- ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY- ST- ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY- ST- ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY- ST- ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE: *Thomas R. Riffle*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Thomas R. Riffle, Treasurer

407/656-2291

CR2E034 (12/95)