DOCUMENT #

NAME

NAME STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

HUDSON, C

4015 12TH PL, SW

VERO BEACH FL

229834 **Secretary of State** 1. Entity Name 01-09-2002 90005 010 ***150.00 POINSETTIA GROVES INC Principal Place of Business Mailing Address 1481 STH AVE. P O BOX 1388 VERO BEACH FL 32961-1388 VERO BEACH FL 32960 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-0882352 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 7. Name and Address of New Registered Agent-6. Name and Address of Current Registered Agent HUDSON.JOHN B Street Address (P.O. Box Number is Not Acceptable) 4726 PEBBLE BAY CIR. VERO BEACH FL 32963 Zip Code FL 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. SIGNATURE 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 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing **\$5.00** May Be After May 1, 2002 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. (10/6) ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME HUDSON, JOHN B NAME CR2E034 4726 PEBBLE BAY CIR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP VERO BCH FL ☐ Change ☐ Addition Delete TITLE TITLE STD NAME NAME HUDSON,E D STREET ADDRESS STREET ADDRESS 4726 PEBBLE BAY CIR CITY-ST-ZIP CITY-ST-ZIP VERO BCH FL ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME HUDSON JR, JOHN B NAME STREET ADDRESS STREET ADDRESS 4015 12TH PL. SW CITY-ST-ZIP CITY-ST-ZIP VERO BCH FL ☐ Change ☐ Addition Delete TITLE TITLE NAME HENDRIX, P.H. NAME STREET ADDRESS STREET ADDRESS 6620 1ST. ST. SW CITY-ST-ZIP CITY-ST-7IP VERO BCH. FL Change ☐ Addition TITLE ☐ Delete TITLE

FILED

Jan 09, 2002 8:00 am

☐ Change

☐ Addition

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered. SIGNATURE:

STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

CITY-ST-ZIP

NAME

☐ Delete