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 # **329906** **(2)**

1. Corporation Name

MAXWELL GROVES INC

Principal Place of Business	Mailing Address
RT 1 BX 238 WAUCHULA FL 33873	RT 1 BX 238 WAUCHULA FL 33873

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

3. Date Incorporated or Qualified: **05/10/1968**

3a. Date of Last Report: **07/25/1995**

4. FEI Number: **59-1084951** ☐ Applied For ☐ Not Applicable

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

9. Name and Address of Current Registered Agent

SMITH, JOSEPH F.
RT 1, BOX 238
MAXWELL RD
WAUCHULA FL 33873

10. Name and Address of New Registered Agent

81 Name: MARY SMITH
82 Street Address (P.O. Box Number is Not Acceptable): RT 1, BOX 238
83 MAXWELL RD
84 City: WAUCHULA FL 85 Zip Code: 33873

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: X Mary M. Smith DATE

12. OFFICERS AND DIRECTORS		
TITLE	PD	☐ DELETE
NAME	ARMSTRONG,PEGGY	
STREET ADDRESS	137 STERLING RD	
CITY-ST-ZIP	HENDERSONVILLE TN	
TITLE	VD	☐ DELETE
NAME	PERKINS,JOYCE	
STREET ADDRESS	7735 DEERFIELD RD	
CITY-ST-ZIP	LIVERPOOL NY	
TITLE	STD	☐ DELETE
NAME	SMITH,MARY	
STREET ADDRESS	RT 1, BOX 238 MAXWELL RD	
CITY-ST-ZIP	WAUCHULA FL	
TITLE	V	☒ DELETE
NAME	SMITH, JOSEPH F.	
STREET ADDRESS	RT.1, BOX 238 MAXWELL RD	
CITY-ST-ZIP	WAUCHULA FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
11 TITLE		☐ Change ☐ Addition
12 NAME		
13 STREET ADDRESS		
14 CITY-ST-ZIP		
21 TITLE		☐ Change ☐ Addition
22 NAME		
23 STREET ADDRESS		
24 CITY-ST-ZIP		
31 TITLE		☐ Change ☐ Addition
32 NAME		
33 STREET ADDRESS		
34 CITY-ST-ZIP		
41 TITLE		☐ Change ☐ Addition
42 NAME	000001757630	
43 STREET ADDRESS	-03/26/96--01089--032	
44 CITY-ST-ZIP	***200.00	
51 TITLE	Vice President	☐ Change ☒ Addition
52 NAME	William H. Pierson	
53 STREET ADDRESS	7735 Deerfield Rd	
54 CITY-ST-ZIP	Liverpool, NY 13088	
61 TITLE		☐ Change ☐ Addition
62 NAME		
63 STREET ADDRESS		
64 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)(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.

SIGNATURE: Mary M. Smith
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-29-96
Date

(941) 773-9065
Daytime Phone Number

SE 3-26-96

CR2E034 (12/95)