

2000 UNIFORM BUSINESS REPORT (UBR)

5/26/00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 MAY 25 PM 1:33

DOCUMENT # A9700002727

1. Entity Name
**Margaret S. Henderson
Groves, LTD**

Principal Place of Business Mailing Address
**Highway 64, East PO Box 698
Wauchula, Fl 33873 Wauchula, Fl 33873**

2. Principal Place of Business 3. Mailing Address
Highway 64, East PO Box 698

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State
Wauchula, Fl 33873 Wauchula, Fl 33873

Zip Country Zip Country
33873 Hardee 33873 Hardee

4. FEI Number Applied For
65 0721660 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent
**Margaret S. Henderson
~~2237 East Rd 64-3~~
Wauchula, Fl 33873**

7. Name and Address of New Registered Agent
Name
Street Address: (P.O. Box Number is Not Acceptable)
City **FL** Zip Code

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

9. Capital Contributions as Shown on record 1,238,250 10. Amount of Capital Contributions in FLORIDA to date 1,238,250 11. **MAKE CHECK PAYABLE TO: DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION**

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	Margaret S. Henderson Highway 64 E. Wauchula, fl 33873
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	Lynn H. Brown Rt #2, Box 185 Lake Providence, La 71254
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	
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13. ADDRESS CHANGES ONLY	
STREET ADDRESS	2237 STRD 64-EAST
CITY-ST-ZIP	WAUCHULA, FL 33873
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	

MAKING ADDRESS: PO BOX 698

100003298251-3
-06/21/00-01012-003
*****526.25 ***526.25**

14. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE: Margaret S. Henderson 3/14/00 Date
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Daytime Phone #

CR2E003 (9/99)