

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 16, 2005 08:00 AM
Secretary of State

DOCUMENT # P99000026437

1. Entity Name
 S. L. Y. GROVES, INC.



Principal Place of Business
 13711 W HWY 450
 UMATILLA, FL 32784

Mailing Address
 P O BOX 387
 UMATILLA, FL 32784



01282005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3568527	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

LAND, SARA S
 590 N CENTRAL AVE
 UMATILLA, FL 32784

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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 _____

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

(NOTE: Registered Agent signature required when reinstating)

DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P STRAKER, HAROLD PO BOX 387 UMATILLA, FL 32784
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP STRAKER, HARRY PO BOX 1 AURORA, NC 27806
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST LAND, SARA PO BOX 744 UMATILLA, FL 32784
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: Sara S Land Secy (Sara S. Land) 2/14/05 352-669-2677
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #