

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000037039

Entity Name: AXEL PETERSON GROVES, INC.

FILED
Feb 24, 2009
Secretary of State

Current Principal Place of Business:

6755 37TH ST.
VERO BEACH, FL 32966

New Principal Place of Business:

Current Mailing Address:

6755 37TH ST.
VERO BEACH, FL 32966

New Mailing Address:

FEI Number: 65-0920106

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PETERSON, KENNETH A
6755 37TH STREET
VERO BEACH, FL 32966 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P/D () Delete
Name: PETERSON, KENNETH A
Address: 6755 37TH ST
City-St-Zip: VERO BEACH, FL 32966

Title: V/D () Delete
Name: KERSHNER, PHYLLIS P
Address: 686 HELICON TERRACE
City-St-Zip: SEBASTIAN, FL 32958

Title: T/D () Delete
Name: CARMINE, BONNIE P
Address: 749 HELICON TERRACE
City-St-Zip: SEBASTIAN, FL 32958

Title: S/D () Delete
Name: WATSON, GAYLE P
Address: 475 43RD AVE. SW
City-St-Zip: VERO BEACH, FL 32968

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: V/D (X) Change () Addition
Name: CARMINE, BONNIE P
Address: 749 HELICON TERRACE
City-St-Zip: SEBASTIAN, FL 32958

Title: S/D (X) Change () Addition
Name: WATSON, GAYLE P
Address: 475 43RD AVE. SW
City-St-Zip: VERO BEACH, FL 32968

Title: D (X) Change () Addition
Name: KERSHNER, PHYLLIS P
Address: 686 HELICON TERRACE
City-St-Zip: SEBASTIAN, FL 32958

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BONNIE P. CARMINE

V/D

02/24/2009

Electronic Signature of Signing Officer or Director

_____ Date