

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 650594

**FILED  
Apr 23, 2016  
Secretary of State  
CC2638160341**

**Entity Name:** BYRD GROVES, INC.

**Current Principal Place of Business:**

6610 HATCHINEHA RD.  
HAINES CITY, FL 33844

**Current Mailing Address:**

6610 HATCHINEHA RD.  
HAINES CITY, FL 33844 US

**FEI Number:** 59-1957356

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

MORRIS, JR, DAVID A  
6610 HATCHINEHA RD.  
HAINES CITY, FL 33844 US

*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

**Officer/Director Detail :**

Title PD  
Name MORRIS, DAVID JR.  
Address 11735 JIM EDWARDS ROAD  
City-State-Zip: HAINES CITY FL 33844

Title SDT  
Name MORRIS, ROSITA  
Address 1648 TYNER ROAD  
City-State-Zip: HAINES CITY FL 33844

Title VD  
Name MORRIS, ROBERT  
Address 1646 TYNER ROAD  
City-State-Zip: HAINES CITY FL 33838

*I hereby 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 all other like empowered.*

**SIGNATURE:** DAVID MORRIS, JR.

P

04/23/2016

Electronic Signature of Signing Officer/Director Detail

Date