

2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000067941

Entity Name: MGB GROVES, LLC

Current Principal Place of Business:

409 W 9TH STREET
FROSTPROOF, FL 33843

Current Mailing Address:

P. O. BOX 8980
SEBRING, FL 33872 US

FEI Number: 45-2505918

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BROOKER, LELAND EIII
409 W 9TH STREET
FROSTPROOF, FL 33843 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

Authorized Person(s) Detail :

Title MGRM
Name BROOKER, LELAND EIII
Address 409 W 9TH STREET
City-State-Zip: FROSTPROOF FL 33843

Title MGRM
Name BROOKER, LACI B
Address 409 W 9TH STREET
City-State-Zip: FROSTPROOF FL 33843

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: LELAND E. BROOKER III

MGMR

01/15/2013

Electronic Signature of Signing Authorized Person(s) Detail

Date