07-06-2005 90034 030 ***1 50.00

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # 171209 1. Entity Name BLUE SINK GROVES, INC.

Principal Place of Business

131 W. MAIN ST. TAVARES, FL 32778 Mailing Address

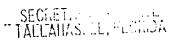
131 W. MAIN ST. TAVARES, FL 32778



171209

FILED

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No Chg-P

CR2E034 (10/03)

4. FEI Number	Applied For	
59-6058143	 Not Applicable	•
5. Certificate of Status Desired	\$8.75 Additional	

6. Name and Address of Current Registered Agent

CAUTHEN, DAVID ERWIN 131 W MAIN ST TAVARES, FL

SIGNATURE:

DO NOT WRITE IN THIS SPACE

6/30/05

IAVARES	ARES, FL 321/8		11 11110 01 702				
	named entity submits this statement for the ions of registered agent.	e purpose of changing its registere	d office or i	egistered agent, or bo	oth, in the State of Florida. I am familiar with, and accept		
SIGNATURE	Signature, typed or printed name of registered agent and to	ide if applicable. (NOTE: Registered	Apert signatur	s required when reinstating)	DATE		
	LE NOWIII FEE IS \$150.00 ue by September 7, 2005	Election Campaign Financ Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.		
10.	OFFICERS AND DIR	RECTORS			<u> </u>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PDS CAUTHEN, DAVID ERWIN 8010 GIBSON TERRACE LEESBURG, FL 00000,						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD CAUTHEN, ROBERT S 8010 GIBSON TERRACE LEESBURG, FL 00000,						
TITLE HAME STREET ADDRESS CITY-SF-ZIP			DO NOT WRITE IN THIS SPACE				
TITLE NAME STREET ADDRESS CITY-ST-ZP							
NAME STREET ADDRESS CITY-ST-TP							
ITILE KAME STREET ADDRESS CITY-ST-ZIP							
indicated of the co	i on this report or supplemental report is tru	ue and accurate and that my signal ered to execute this report as regul	lure shall hi	ave the same legal off	(ii), Florida Statutes. I further certify that the information ect as if made under eath; that I am an officer or director tes; and that my name appears in Block 10 or Block 11 if		