FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996 205238 **DOCUMENT #**

(9)

1. Corporation PIPPING Principal Place of 1710 MARIPOS BARTOW FL 3	G GROVES, INC. of Business	Mailing Address 1710 MARIPOSA BARTOW FL 33830								
						3. Date incorporated or Qualified 08/20/1957	3a. Da	te of Last R 01/17/19	leport 95	
2. Principal Plac	co of Rusinace	2a Mailing Address	2a. Mailing Address			4. FEI Number			Applied For	
21 Principal Flat	CG OLDUSILIESS	26				59-0814442	Not Applicable			
Suite, Apt. #	, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required				
22		27								
City & State		City & State			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees				
23 Zip	Country					8. This corporation has liability for	intangible tax under			
24	25	29	30			Florida Statutes Yes	□] No			
	9. Name and Address of Current	Registered Agent			None	10. Name and Address of New F	egistered	J Agent		
PIPPING,	IR FR			81	Name					
	RIPOSA AVE			82	Street Addr	ress (P.O. Box Number is Not Acceptat	ile)			
	FL 33830			83						
									Code	
				84	Crty		FI	LII	ip Code	
SIGNATURE	ignator, typed or printed name of eg sterestagent e OFFICENS AND	Notifie if application (Notifie if application (Notifie if application (Notifie if application in the interest of the interest				ration submits this statement for the pur ird of directors. Thereby accept the app of white is initiately: ADDITIONS/CHANGES TO OFF	() S	>/96 ND DIRECTO	DRS IN 12	
TITLE	PD DIDDING ID E D	☐ DELETE	1.11	TITLE				Change	Addition	
NAME	PIPPING JR,E R 1710 MANIPOSA AVENUE		1.2 N							
STREET ADDRESS	BARTOW FL				ADDRESS					
CITY-ST-ZIP TITLE	STD	[] DELETE	2.1	ITY - SI TITLE	1 - ZIP			() Change	Addition	
NAME	YAWN, W.E.	<u>.</u>	221							
STREET ADDRESS	232 NORTH MASS		235	TREET.	ADDRESS					
CITY - ST- ZIP	LAKELAND FL			11Y-S1	- ZIP					
TITLE	SD MARY ANN PIPPING	DELETE	1	TITLE				☐ Change	Addition	
NAME	1710 MANIPOSA AVENUE		32 N		ADDRESS					
STREET ADDRESS	BARTOW FL		1	STREET XITY - ST	ADDRESS - ZIP					
CITY-ST-ZIP TITLE		☐ DELETE	4.1		- 211			Change	Add-tion	
NAME		J	421							
STREET ADDRESS			4.3 5	TREET	ADORESS					
CITY-ST-ZIP				CITY-S	T- ZIP				<u> </u>	
TITLE		☐ DELETE	5 1					☐ Change	Add-tion	
NAME			5.2 N		AP NOTOS					
STREET ADDRESS					ADDRESS					
CITY-ST-ZIP TITLE		☐ DELETE	6.1	HTY-SI TITLE	- 211			Charige	Addition	
NAME			621							
STREET ADDRESS			635	TREET	ADURESS					
CITY-ST-ZIP				ITY-S			07/0-21	Table Dist	den 15 de	
certify that oath: that I	the information indicated on this annill	al report or supplementa and ation or the receiver or truste	nual report se empowe	IS ITU	e and accura	for the exemption stated in Section 119 ate and that my signature shall have the is report as required by Chapter 607, Fl	same leuk	ar effect as i	ii inace uncer	
SIGNAT		PRINTED NAME OF SIGNING OFFIC	ER OF DIREC	TOR	rody	1/13/46 (kile	941	-S 3Z- Digtoir Prioric	16/7	