

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 212502 (9)

1. Corporation Name

CA-LO-LA GROVES INC

Principal Place of Business

1805 DOGWOOD LANE
APEX NC 27502

Mailing Address

1805 DOGWOOD LANE
APEX NC 27502



2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

JOHNSON, FRANCIS T.
11131 STONEGATE COURT
ORLANDO 32837

3. Date Incorporated or Qualified

05/28/1958

3a. Date of Last Report

04/17/1995

4. FEI Number

59-0839457

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes. ☐ Yes ☒ No

10. Name and Address of New Registered Agent

81 Name

FRANCIS T. JOHNSON

82 Street Address (P.O. Box Number is Not Acceptable)

10221 LEEDS CT.

83

84 City

ORLANDO

FL

85

Zip Code

32836

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

(Signature type for principal place of registered agent is not applicable)

(Signature type for new agent is not applicable)

DATE

12. OFFICERS AND DIRECTORS

TITLE

PD

☐ DELETE

NAME

JOHNSON, FRANCIS M
1805 DOGWOOD LANE
APEX NC

STREET ADDRESS

CITY- ST- ZIP

TITLE

VD

☐ DELETE

NAME

JOHNSON, FRANCIS T.
11131 STONEGATE COURT
ORLANDO FL

STREET ADDRESS

CITY- ST- ZIP

TITLE

S

☐ DELETE

NAME

JOHNSON, ERMA F.
1805 DOGWOOD LANE
APEX NC

STREET ADDRESS

CITY- ST- ZIP

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY- ST- ZIP

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY- ST- ZIP

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY- ST- ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

☐ Change

☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY- ST- ZIP

2.1 TITLE

☐ Change

☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY- ST- ZIP

V.D. FRANCIS T. JOHNSON

10221 LEEDS CT

ORLANDO, FL 32836

3.1 TITLE

☐ Change

☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY- ST- ZIP

4.1 TITLE

☐ Change

☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY- ST- ZIP

5.1 TITLE

☐ Change

☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY- ST- ZIP

6.1 TITLE

☐ Change

☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY- ST- ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

FRANCIS M. JOHNSON

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/14/96

919-362-4609

CR2E034 (12/95)