## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # 216027

**NAVAJO GROVES INC** 

•	
Principal Place of Business	Mailing Address
2496 S.KINGS HWY.	2496 S.KINGS HWY.
ET DIEDCE EL MOAS	ET DIEDAE EL SAGAE

## FILED Jan 29, 1999 8:00am Secretary of State

01-29-1999 90064 027 \*\*\*150.00



DO NOT WRITE IN THIS SPACE

2. Pennipal Place of Business 21   20   50   50   50   6068007   No. No. Apr. 4, etc. 22   27   Suite, Apt. #, etc. 23   27   28   29   50   5. Certificate of Status Desired   Fee Requirement of Property Tax.   Fe							10/03/1958		
Suite, Apt. #, etc.    Suite, Apt. #, etc.	2. Principal Place of Business 2a. Mailing Address							Applied For	
Suite, Apt. #, etc.  23   27   City & State  City & State  City & State  28   City & State  29   Country   Country   St. Only   St.					4		Not Applicable		
City & State  City & Country  City & State  City & Country  City & State  City & Country  City & State  City & Sta							\$8.75 Additional		
City & State    City & State	·		ļ.	27				Fee Required	
Zip   Country   Zip   Country   Zip   Country   Zip   Country   S. Trust Fund Contribution   Added to F. Paranan Property Tax.   Qi Yes   Zip		e		<u> </u>			6. Election Campaign Financing	\$5.00 May Be	
9. Name and Address of Curron Registered Agent  9. Name and Address of Curron Registered Agent  9. Name and Address of Curron Registered Agent  9. Name and Address of Naw Registered Agent  9. Name and Address of Name Registered Agent  9. Name and Address of Naw Registered Agent  9. Name and Address of Naw Registered Agent  9. Name and Address of Name Agent  10. Name and Address	23		[:	28				Added to Fees	
WOLF, WILLIAM L 2496 S KINGS HWY FORT PIERCE FL 34945  81 Name  82 Street Address (P.O. Box Number is Not Acceptable)  83 Zip Code  84 City Fort Pierce FL 34945  84 City Fort Pierce FL 34945  85 Zip Code  86 City Fort Pierce FL 34945  86 City Fort Pierce FL 34945  87 Signature, specific adjustment of Sections 607 7592 and 607 7598, Floridas Statutes, the above-named corporation submits this statement for the purpose of changing its registrent of agent, or both, in the State of Florida Statutes, the above-named corporation's board of directors. Thereby accept the appointment as registrent agent and agent, or both in the State of Florida Statutes, the above-named corporation's board of directors. Thereby accept the appointment as registrent agent and agent, and accept the obligations of, Section 607 d505, Florida Statutes, the above-named corporation's board of directors. Thereby accept the appointment as registrent agent and agent, and address of New Registered Agent agent, and address (P.O. Box Number is Not Acceptable)  82 Street Address (P.O. Box Number is Not Acceptable)  83 Zip Code  84 City  85 Zip Code  85	Zip				Country	,	8. This corporation owes the current year	r Intangible	
WOLF, WILLIAM L 2498 S KINGS HWY FORT PIERCE FL 34945  82 Street Address (P.O. Box Number is Not Acceptable)  83   84 City   FL   85 Zip Cod  85 Zip Cod  86 City   FL   85 Zip Cod  87 Zip Cod  88 Zip Cod  89 Zip Cod  80 Zi	24	25	[	29	30				
WOLF, WILLIAM L 2496 S KINGS HWY FORT PIERCE FL 34945  84 City  84 City  85 Zip Cold  11- Pursiant 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 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 regist agent. I am familiar with, and accept the obligations of, Section 607,0505, Florida Statutes.  SIGNATURE  90 OFFICERS AND DIRECTORS  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  14. CITY Replaced Agent algoritus required when remindately  NOELKE, JOSEPH H  1300 HARTMAN RD.  13 STREET ADDRESS  60 OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  14. CITY Replaced Agent algoritus required when remindately  15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  16. The Replaced Agent algoritus required when remindately  16. The Replaced Agent algoritus required when remindately  17. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  19. The Replaced Agent algoritus required when remindately  10. The PLORES AND DIRECTORS  11. The DIRECTORS  12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  14. CITY ST. 2P  15. The Replaced Agent algority and algority and algority algority and		9. Name and Add	ress of Current Re	gistered Agent			10. Name and Address of New Registe	red Agent	
### PORT PIERCE FL 34945  ### B5  ### City	Solver and the solver					81 Name			
FORT PIERCE FL 34945  83  84 City	WOL	lf, William L.			82	82 Street Address (P.O. Box Number is Not Acceptable)			
Section   Sect				•	"	Street Address (F.O. Box Humber is Not Acceptable)			
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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the informatic 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, with all other like empowered.

SIGNATURE:

GRATURE AND TYPED OF PRINTED NAME OF SUSPING OFFICER OF DIRECTOR

12 Jan 99

561-461-3108 Daytime Phone #

:R2E034 (11/98)