2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 229834

Entity Name: POINSETTIA GROVES INC

FILED Jan 08, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1481 8TH AVE.

VERO BEACH, FL 32960

Current Mailing Address: New Mailing Address:

P O BOX 1388 P O BOX 1388

VERO BEACH, FL 329611388 US VERO BEACH, FL 32961 US

FEI Number: 59-0882352 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

HUDSON, JOHN B 4726 PEBBLE BAY CIR. HUDSON, JOHN B 4726 PEBBLE BAY CIR.

VERO BEACH, FL 32963 US VERO BEACH, FL 32963 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: JOHN B. HUDSON 01/08/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VD () Delete Title: VD (X) Change () Addition

 Name:
 HUDSON, JOHN B,
 Name:
 HUDSON, JOHN B

 Address:
 4726 PEBBLE BAY CIR
 Address:
 4726 PEBBLE BAY CIR

 City-St-Zip:
 VERO BCH, FL
 City-St-Zip:
 VERO BCH, FL
 32963

Title: STD () Delete Title: STD (X) Change () Addition

 Name:
 HUDSON, E D,
 Name:
 HUDSON, E .D.

 Address:
 4726 PEBBLE BAY CIR
 Address:
 4726 PEBBLE BAY CIR

City-St-Zip: VERO BCH, FL 32963

Title: PD () Delete Title: PD (X) Change () Addition Name: HUDSON JR, JOHN B, Name: HUDSON, JR, JOHN B

 Address:
 4015 12TH PL. SW
 Address:
 4015 12TH PL. SW

 City-St-Zip:
 VERO BCH, FL
 City-St-Zip:
 VERO BCH, FL 32968

Title: D () Delete Title: D (X) Change () Addition

 Name:
 HENDRIX, P.H.
 Name:
 HENDRIX, P.H.

 Address:
 6620 1ST. ST. SW
 Address:
 6620 1ST. ST. SW

 City-St-Zip:
 VERO BCH., FL
 23263

Title: D () Delete Title: D (X) Change () Addition

 Name:
 HUDSON, C,
 Name:
 HUDSON, C
 Name:
 <th

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ELISABETH D. HUDSON STD 01/08/2009