


**FILED**  
**Feb 11, 2008 08:00 AM**  
**Secretary of State**

DOCUMENT # 236603

1. Entity Name  
NOKOMIS GROVES INC



Principal Place of Business  
111 S. ALBEE FARMS RD.  
NOKOMIS, FL 34275

Mailing Address  
111 S. ALBEE FARMS RD.  
NOKOMIS, FL 34275

Barcode

01052008 No Chg-P CR2E034 (11/05)

4. FEI Number  
59-0921626

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent  
KEMERER, BRENDA S H  
111 S ALBEE FARMS ROAD  
NOKOMIS, FL 34275

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with and accept the obligations of registered agent.

SIGNATURE Brenda Kemerer  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00  
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing  
Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

02/13/08 80035-025 150.00

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	LEACH, NADINE HENDERSON
STREET ADDRESS	111 S ALBEE FARMS ROAD
CITY-ST-ZIP	NOKOMIS, FL
TITLE	V
NAME	FISCHER, LINDA C
STREET ADDRESS	111 S. ALBEE FARM ROAD
CITY-ST-ZIP	NOKOMIS, FL
TITLE	VST
NAME	KEMERER, BRENDA S H
STREET ADDRESS	111 S ALBEE FARMS RD
CITY-ST-ZIP	NOKOMIS, FL
TITLE	V
NAME	HENDERSON, KIRK
STREET ADDRESS	111 S. ALBEE FARMS RD.
CITY-ST-ZIP	NOKOMIS, FL
TITLE	V
NAME	PAL, JOANNA
STREET ADDRESS	111 S. ALBEE FARMS RD.
CITY-ST-ZIP	NOKOMIS, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE Brenda Kemerer  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-08-08 941 4885274  
Date Daytime Phone #