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**2005 FOR PROFIT CORPORATION ANNUAL REPORT**

05 JUL 22 PM 4: 05

SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

K. Eckel AUG 02 2005

|   |                                    |  |   |
|---|------------------------------------|--|---|
| <b>DOCUMENT # 264097</b>  |                                    |                             |   |
| 1. Entity Name<br>ROY F. ROBERTS & SON GROVES, INC.   |                                    |  |   |
| Principal Place of Business<br>CORAL AVENUE<br>SCOTTSMORE, FL 32775 US  |                                    | Mailing Address<br>P O BOX 504<br>SOCTSMOOR, FL 32775 US   |   |
| 2. Principal Place of Business  |                                    | 3. Mailing Address   |   |
| Suite, Apt. #, etc.   |                                    | Suite, Apt. #, etc.  |   |
| City & State  |                                    | City & State   |   |
| Zip   | Country                            | Zip  | Country   |
| 4. FEI Number<br>59-0978968   |                                    | Applied For<br><input type="checkbox"/> Not Applicable   |   |
| 5. Certificate of Status Desired <input type="checkbox"/>   |                                    | \$8.75 Additional Fee Required   |   |
| 6. Name and Address of Current Registered Agent<br>CALDERWOOD, JOE P<br>1538 S. WASHINGTON AVE.<br>TITUSVILLE, FL 32780   |                                    | 7. Name and Address of New Registered Agent  |   |
|   |                                    | Name   |   |
|   |                                    | Street Address (P.O. Box Number is Not Acceptable)   |   |
|   |                                    | City   |   |
|   |                                    | FL Zip Code  |   |
| 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 _____ DATE _____  |                                    |  |   |
| <small>(Signature, Name or printed name of registered agent and title if applicable) (NAME: Registered Agent signature required when renouncing)</small>  |                                    |  |   |
| <b>FILE NOW!!! FEE IS \$550.00 Due by September 7, 2005</b>   |                                    | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees |   |
| 10. OFFICERS AND DIRECTORS  |                                    | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  |   |
| TITLE   | PD <input type="checkbox"/> Delete | TITLE  | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME  | ROBERTS, ROY F. JR.                | NAME   |   |
| STREET ADDRESS  | NORTH US #1                        | STREET ADDRESS   |   |
| CITY-ST-ZIP   | TITUSVILLE, FL 00000,              | CITY-ST-ZIP  |   |
| TITLE   | VO <input type="checkbox"/> Delete | TITLE  | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME  | ROBERTS, ROY, F. III               | NAME   |   |
| STREET ADDRESS  | NORTH US #1                        | STREET ADDRESS   |   |
| CITY-ST-ZIP   | TITUSVILLE, FL 00000,              | CITY-ST-ZIP  |   |
| TITLE   | <input type="checkbox"/> Delete    | TITLE  | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME  |                                    | NAME   |   |
| STREET ADDRESS  |                                    | STREET ADDRESS   |   |
| CITY-ST-ZIP   |                                    | CITY-ST-ZIP  |   |
| TITLE   | <input type="checkbox"/> Delete    | TITLE  | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME  |                                    | NAME   |   |
| STREET ADDRESS  |                                    | STREET ADDRESS   |   |
| CITY-ST-ZIP   |                                    | CITY-ST-ZIP  |   |
| TITLE   | <input type="checkbox"/> Delete    | TITLE  | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME  |                                    | NAME   |   |
| STREET ADDRESS  |                                    | STREET ADDRESS   |   |
| CITY-ST-ZIP   |                                    | CITY-ST-ZIP  |   |
| TITLE   | <input type="checkbox"/> Delete    | TITLE  | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME  |                                    | NAME   |   |
| STREET ADDRESS  |                                    | STREET ADDRESS   |   |
| CITY-ST-ZIP   |                                    | CITY-ST-ZIP  |   |
| 12. 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 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: <i>X Roy F. Roberts</i>  |                                    | Date _____ Daytime Phone # _____   |   |
| <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>   |                                    |  |   |

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ROY F ROBERTS & SON GROVES INC.  
P.O. BOX 504  
SCOTTSMOOR, FLORIDA 32775

July 20, 2005

Florida Department of State  
Division of Corporations  
Post Office Box 6327  
Tallahassee, Florida 32314

Attention: Ms. Glenda E. Hood

Dear Ms Hood,

It was never my intent to let my corporation go to dissolution. The first time I realized that was about to happen was when I received your notice. I never received any other correspondence from your office. I am asking for your help in accepting the normal fee of \$150.00.

Thank you in advance for any consideration you may give me.

Sincerely,

Roy F. Roberts & Son Groves, Inc.

  
Roy F. Roberts