2002 UNIFORM BUSINESS REPORT (UBR)

Mar 06, 2002 8:00 am DOCUMENT # 268441 **Secretary of State** 1. Entity Name 03-06-2002 90010 023 ***150.00 R.H. LAWHON GROVES, INC. Principal Place of Business Mailing Address 2011 LAKE LOTELA DR. 2011 LAKE LOTELA DR AVON PARK FL 33825 AVON PARK FL 33825 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-1017629 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name FOSTER, DAVID L. Street Address (P.O. Box Number is Not Acceptable) 555 4TH STREET NORTH ST. PETERSBURG FL 33701 City 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. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. TITLE Delete TITLE ☐ Addition TURNBULL, MARGARET L NAME NAMÉ 2011 LAKE LOTELA DR STREET ADDRESS STREET ADDRESS AVON PARK FL 33825-8031 CITY-ST-ZIP CITY-ST-ZIP **AST** TITLE **X** Addition TULE ☐ Detete FOSTER, DAVID L. NAME NAME STREET ADDRESS STREET ADDRESS 555 4TH STREET NORTH CITY-ST-7iP ST PETERSBURG FL CITY-ST-ZIP 3370 I TITLE. Change ☐ Addition TITLE _ LAWHON, ANNA ELIZABETH NAME NAME STREET ADDRESS STREET ADDRESS 4522 MORRIS RD CITY-ST-ZIP CiTY-ST-7IP JACKSONVILLE FL 32225 TITLE ☐ Delete TITLE ☐ Change ☐ Addition CLARK, DOROTHY L NAME NAME STREET ADDRESS 2707 WOODLAND DR STREET ADDRESS WACO TX 76710-2155 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. 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 11 or Block 12 if

Feb. 1, 2002

changed, or on an attachment with an address, with all other like empowered