2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 276094

DOOFDO ODOVEO INIO

SMITH, JEAN R.

6572 LAGOON AVENUE

WINDERMERE, FL 34786

Name:

Address:

City-St-Zip:

FILED Jan 17, 2005 Secretary of State

Entity Name: ROGERS GROVES, INC.					
Current Principal Place of Business:			New Principal P	New Principal Place of Business:	
7100-39 #237 PALM BEACH GARDENS, FL 33418			5 VIA AURELIA PALM BEACH GA	5 VIA AURELIA PALM BEACH GARDENS, FL 33418	
Current Mailing Address:			New Mailing Add	New Mailing Address:	
7100-39 #237 PALM BEACH GARDENS, FL 33418			5 VIA AURELIA PALM BEACH GA	5 VIA AURELIA PALM BEACH GARDENS, FL 33418	
FEI Number:	: 59-1017637	FEI Number Applied For ()	FEI Number Not Applicable () Certificate of Status Desired (X)	
Name and Address of Current Registered Agent:			Name and Addre	Name and Address of New Registered Agent:	
RACE, CHARLES H JR 7100-39 FAIRWAY DR 3227 PALM BEACH GARDENS, FL 33418 US			5 VIA AURELIA	RACE, CHARLES H JR 5 VIA AURELIA PALM BEACH GARDENS, FL 33418 US	
	named entity of Florida.	submits this statement for the	purpose of changing its regis	stered office or registered agent, or both,	
SIGNATURE: CHARLES H. RACE, JR.				01/17/2005	
Election Car		nic Signature of Registered Agg Trust Fund Contribution ().	ent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHA	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	RACE, HERBE	S GARDENS ROAD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	PD (RACE, CHARLI 5 VIA AURELIA WINTER HAVE		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	FREDERICK, J	AMPSHIRE AVE.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	TD () Delete	Title:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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 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.

Name:

Address:

City-St-Zip:

SIGNATURE: CHARLES H. RACE, JR. PD 01/17/2005