

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 278003

FILED
Jan 16, 2009
Secretary of State

Entity Name: STOKES GROVES OF EUSTIS INC

Current Principal Place of Business:

235 EAST BADGER AVENUE
P.O. BOX 1256
EUSTIS, FL 327278256

New Principal Place of Business:

15006 STOKES ACRES DRIVE
TAVARES, FL 32778

Current Mailing Address:

P.O. BOX 1256
EUSTIS, FL 32727

New Mailing Address:

P.O. BOX 89
TAVARES, FL 327780089

FEI Number: 59-1054067

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STOKES, ROBERT A
235 E BADGER ST
EUSTIS, FL 32726 US

Name and Address of New Registered Agent:

STOKES, ROBERT A
15006 STOKES ACRES DRIVE
TAVARES, FL 32778 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:

01/16/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PT () Delete
Name: STOKES, ROBERT A,
Address: 235 E BADGER ST
City-St-Zip: EUSTIS, FL

Title: S () Delete
Name: STOKES, MARY P,
Address: 235 EAST BADGER ST
City-St-Zip: EUSTIS, FL

Title: S () Delete
Name: STOKES, PAULA E
Address: 235 E BADGER ST
City-St-Zip: EUSTIS, FL 32726

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PT (X) Change () Addition
Name: STOKES, ROBERT A,
Address: 15006 STOKES ACRES DRIVE
City-St-Zip: TAVARES, FL 32778

Title: DIR (X) Change () Addition
Name: STOKES, MARY P,
Address: 235 EAST BADGER ST
City-St-Zip: EUSTIS, FL 32726

Title: S (X) Change () Addition
Name: STOKES, PAULA E
Address: PO BOX 89
City-St-Zip: TAVARES, FL 32778

Title: VP () Change (X) Addition
Name: SUMNER, EVA A
Address: 15685 SE 92ND COURT
City-St-Zip: SUMMERFIELD, FL 34491

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: ROBERT A STOKES

PRES

01/16/2009

Electronic Signature of Signing Officer or Director

Date