2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 282860

FILED Mar 29, 2009 Secretary of State

Entity Name: DESOTO GROVES AND DEVELOPMENT, INC.

Current Principal Place of Business:		e of Business:	New Principal Place of Business:	
5577 SW ARCADIA	HYW 72 , FL 34266	US		
Current Mailing Address:		ess:	New Mailing Address:	
5577 SW ARCADIA	HWY 72 s, FL 34266	US		
FEI Number	r: 59-1055332	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	d Address of	Current Registered Agent:	Name and Address	of New Registered Agent:
3775 BEN	, CHRISTOPH IEVA OAKS BI TA, FL 34238			
	e named entity te of Florida.	submits this statement for the	purpose of changing its registere	ed office or registered agent, or both,
	te of Florida. IRE:			ed office or registered agent, or both,
in the Stat	te of Florida. IRE:	submits this statement for the		ed office or registered agent, or both, Date
in the Stat SIGNATU	te of Florida. IRE: Electro			
in the Stat SIGNATU Election Ca	te of Florida. IRE: Electro	nic Signature of Registered Ag	rent	
in the Stat SIGNATU	te of Florida. IRE: Electro Impaign Financia IS AND DIRECTO	onic Signature of Registered Aging Trust Fund Contribution (). CTORS:) Delete RISTOPHER P. OAKS BLVD	rent	Date
in the Stat SIGNATU Election Ca OFFICER Title: Name: Address:	te of Florida. IRE: Electro Impaign Financii S AND DIREC P (BONNET, CHE 3775 BENEVA SARASOTA, F	onic Signature of Registered Ageng Trust Fund Contribution (). CTORS:) Delete RISTOPHER P. OAKS BLVD FL) Delete AN	ADDITIONS/CHANG Title: Name: Address:	Date ES TO OFFICERS AND DIRECTORS

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: CHRISTOPHER P. BONNET P 03/29/2009