2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 296804

Entity Name: LAGOMAR GROVES, INC.

FILED Jan 19, 2009 Secretary of State

Current Principa	al Place of Business:	New Principal Place of Business:

2122 PARK HOLLAND DR
LEESBURG, FL 34748
2122 PARK HOLLAND RD
LEESBURG, FL 34748

Current Mailing Address: New Mailing Address:

2122 PARK HOLLAND DR 2122 PARK HOLLAND RD LEESBURG, FL 34748 LEESBURG, FL 34748

FEI Number: 59-1155055 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BINNEVELD, WILLIAM J.
2122 PARK HOLLAND DR
LEESBURG, FL 34748 US
BINNEVELD, WILLIAM J.
2122 PARK HOLLAND RD
LEESBURG, FL 34748 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: 01/19/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition Name: BINNEVELD, GEOFFREY, H., JR

Address: 715 BOYLSTON ST Address: 715 BOYLSTON ST
City-St-Zip: LEESBURG, FL City-St-Zip: LEESBURG, FL

Title: VPD () Delete Title: () Change () Addition Name: BENSON,PATRICIA B., Name:

Address: 5 CRISBEN CT. Address: City-St-Zip: COLUMBUS, CA City-St-Zip:

Title: STD () Delete Title: STD (X) Change () Addition

Name:BINNEVELD, WILLIAM J, .Name:BINNEVELD, WILLIAM J, .Address:2122 PARK HOLLAND DRAddress:2122 PARK HOLLAND RD

City-St-Zip: LEESBURG, FL City-St-Zip: LEESBURG, FL

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: WILLIAM J. BINNEVELD STD 01/19/2009