

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 16, 2006 08:00 AM
Secretary of State

DOCUMENT # 312634

1. Entity Name
TEDDER GROVES, INC.



Principal Place of Business
**BOX 5021 HWY 11
DELEON SPGS, FL 32130**

Mailing Address
**BOX 5021 HWY 11
DELEON SPGS, FL 32130**

DO NOT WRITE IN THIS SPACE



03072006 No Chg-P CR2E034 (11/05)

4. FEI Number
59-1198813

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

**TEDDER, WENDELL H
BOX 5021 HWY 11
DELEON SPGS, FL 32028**

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reappointing)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	VTD
NAME	TEDDER, TERESA
STREET ADDRESS	BOX 5021 HWY 11
CITY-ST-ZIP	DELEON SPRINGS, FL
TITLE	PSD
NAME	TEDDER, WENDELL H.
STREET ADDRESS	BOX 5021 HWY 11
CITY-ST-ZIP	DELEON SPRINGS, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

03/28/06-80008-016 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Wendell Tedder **WENDELL TEDDER**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #