

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 315551

FILED
Jul 05, 2004
Secretary of State

Entity Name: GUTWEIN GROVES, INC.

Current Principal Place of Business:

823 FT. THOMPSON AVE.
P. O. BOX 158
LABELLE, FL 33935

New Principal Place of Business:

909 E STEWART DRIVE
RENSELAER, IN 47978

Current Mailing Address:

823 FT. THOMPSON AVE.
P. O. BOX 158
LABELLE, FL 33935

New Mailing Address:

FEI Number: 59-1165549 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BEER, VICTOR
823 FT THOMPSON AVENUE
LABELLE, FL 33935

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BEER, VICTOR,
Address: 823 FT THOMPSON AVENUE
City-St-Zip: LABELLE, FL

Title: VP () Delete
Name: SIDNEY LEMAN,
Address: BOV 562- VIOLET DR 15
City-St-Zip: FRANCESVILLE, IN

Title: AS () Delete
Name: DOROTHY BEER,
Address: 823 FT THOMPSON AVE
City-St-Zip: LA BELLE, FL

Title: TCFO () Delete
Name: GUTWEIN, BRENT C
Address: 809 STEWART DR.
City-St-Zip: RENSELAER, IN 47978

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: TCFO (X) Change () Addition
Name: GUTWEIN, BRENT C
Address: 909 STEWART DR.
City-St-Zip: RENSELAER, IN 47978

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.

SIGNATURE: BRENT C. GUTWEIN

TCFO

07/05/2004

Electronic Signature of Signing Officer or Director

_____ Date