2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 329906

Entity Name: MAXWELL GROVES INC

FILED Mar 01, 2002 8:00 AM Secretary of State

Current Principal Place of Business: New Principal Place of Business:

249 MAXWELL DRIVE WAUCHULA, FL 33873

Current Mailing Address: New Mailing Address:

249 MAXWELL DRIVE 249 MAXWELL DRIVE WAUCHULA, FL 33873 WAUCHULA, FL 33873 US

FEI Number: 59-1084951 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:

SMITH, MARY MAXWELL MAXWELL, MARY A MS. 249 MAXWELL DR. 249 MAXWELL DRIVE WAUCHULA, FL 33873 WAUCHULA, FL 33873 US 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: MARY A. MAXWELL 03/01/2002

> Electronic Signature of Registered Agent Date

> > Title:

VD

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X). Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

VD

Title:

Name: Address:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition ARMSTRONG, PEGGY ARMSTRONG, PEGGY Name: Name: 8150 BRENT ST APT 720 8150 BRENT ST APT 721 Address: Address:

City-St-Zip: PORT RICHEY, FL 34668 City-St-Zip: PORT RICHEY, FL 34668

() Delete (X) Change () Addition PERKINS, JOYCE Name: PERKINS, JOYCE Name: 7735 DEERFIELD RD 7735 DEERFIELD RD Address: Address: LIVERPOOL, NY LIVERPOOL, NY 13090 City-St-Zip: City-St-Zip:

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

SMITH, MARY MAXWELL MAXWELL, MARY A MS Name: Name: 249 MAXWELL DRIVE 249 MAXWELL DRIVE Address: Address: City-St-Zip: WAUCHULA, FL 33873 City-St-Zip: WAUCHULA, FL 33873

Title: () Delete Title: () Change () Addition

PERKINS, WILLIAM H Name: 7735 DEERFIELD RD Address: City-St-Zip: LIVERPOOL, NY 13090 City-St-Zip:

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: MARY A. MAXWELL STD 03/01/2002