

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 329906

Entity Name: MAXWELL GROVES INC

FILED  
Jan 12, 2004  
Secretary of State

## Current Principal Place of Business:

249 MAXWELL DRIVE  
WAUCHULA, FL 33873

## New Principal Place of Business:

## Current Mailing Address:

249 MAXWELL DRIVE  
WAUCHULA, FL 33873 US

## New Mailing Address:

12536 ECLIPSE COURT  
NEW PORT RICHEY, FL 34654 US

FEI Number: 59-1084951

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MAXWELL, MARY A MS.  
249 MAXWELL DRIVE  
WAUCHULA, FL 33873 US

## Name and Address of New Registered Agent:

ARMSTRONG, PEGGY P  
12536 ECLIPSE COURT  
NEW POR RICHEY, FL 34654 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: PEGGY ARMSTRONG

01/12/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: ARMSTRONG, PEGGY  
Address: 8150 BRENT ST APT 721  
City-St-Zip: PORT RICHEY, FL 34668

Title: VD ( ) Delete  
Name: PERKINS, JOYCE  
Address: 7735 DEERFIELD RD  
City-St-Zip: LIVERPOOL, NY 13090

Title: STD ( ) Delete  
Name: MAXWELL, MARY A MS  
Address: 249 MAXWELL DRIVE  
City-St-Zip: WAUCHULA, FL 33873

Title: V ( ) Delete  
Name: PERKINS, WILLIAM H  
Address: 7735 DEERFIELD RD  
City-St-Zip: LIVERPOOL, NY 13090

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: ARMSTRONG, PEGGY  
Address: 12536 ECLIPSE COURT  
City-St-Zip: NEW PORT RICHEY, FL 34654

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

Title: STD (X) Change ( ) Addition  
Name: MAXWELL, MARY A MS  
Address: 131 SHELTON DR.  
City-St-Zip: WAUCHULA, FL 33873

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: PEGGY ARMSTRONG

PD

01/12/2004

Electronic Signature of Signing Officer or Director

Date