

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.  
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)**

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 332778 (0)

1. Corporation Name  
**S & S GROVES, INC.**



Principal Place of Business: 12385 SUNSET HARBOR ROAD, BOX 189, WEIRSDALE FL 32195  
Mailing Address: 12385 SUNSET HARBOR ROAD, BOX 189, WEIRSDALE FL 32195

2. Principal Place of Business (21-24) and 2a. Mailing Address (25-30) fields with sub-fields for Suite, Apt #, City & State, Zip, and Country.

3. Date Incorporated or Qualified: 07/22/1968  
3a. Date of Last Report: 10/02/1995  
4. FEI Number: 59-1220796  
5. Certificate of Status Desired:  \$8.75 Additional Fee Required  
6. Election Campaign Financing Trust Fund Contribution:  \$5.00 May Be Added to Fees  
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes:  Yes  No

9. Name and Address of Current Registered Agent: SCALES, KEY JR., 12385 SUNSET HARBOR ROAD, P.O. BOX 189, WEIRSDALE FL 32195  
10. Name and Address of New Registered Agent (81-85) fields for Name, Street Address, City, and Zip Code (FL).

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: \_\_\_\_\_ (Signature lines for registered agent and corporation)

12. OFFICERS AND DIRECTORS

TITLE	P	SCALE, KEY JR.	<input type="checkbox"/> DELETE
NAME		SCALE, KEY JR.	
STREET ADDRESS		12385 SUNSET HARBOR RD	
CITY - ST - ZIP		WEIRSDALE FL	
TITLE	V	SCALE, KEY III	<input type="checkbox"/> DELETE
NAME		SCALE, KEY III	
STREET ADDRESS		RT 6, BOX 385	
CITY - ST - ZIP		LEESBURG FL	
TITLE	S	SCALE, FLORENCE	<input type="checkbox"/> DELETE
NAME		SCALE, FLORENCE	
STREET ADDRESS		12385 SUNSET HARBOR RD	
CITY - ST - ZIP		WEIRSDALE FL	
TITLE			<input type="checkbox"/> DELETE
NAME			
STREET ADDRESS			
CITY - ST - ZIP			
TITLE			<input type="checkbox"/> DELETE
NAME			
STREET ADDRESS			
CITY - ST - ZIP			

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1 2 NAME	
1 3 STREET ADDRESS	
1 4 CITY - ST - ZIP	
2 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2 2 NAME	
2 3 STREET ADDRESS	
2 4 CITY - ST - ZIP	
3 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3 2 NAME	
3 3 STREET ADDRESS	
3 4 CITY - ST - ZIP	
4 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4 2 NAME	
4 3 STREET ADDRESS	
4 4 CITY - ST - ZIP	
5 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5 2 NAME	
5 3 STREET ADDRESS	
5 4 CITY - ST - ZIP	
6 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6 2 NAME	
6 3 STREET ADDRESS	
6 4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Key Scales, Jr.* KEY SCALES, JR. 6-17-96  
DATE: \_\_\_\_\_

CR2E034 (3/96)