FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 340407

(6)

SECURITY GROVES INC

FILED Apr 27 1998 8:00am Secretary of State



Principal Place of Business Mailing Address						
1435 EAGLE AVENUE P.O. BOX 844						
EAGLE LAKE FL 33839		EAGLE LAKE FL 33839	· · · · · · · · · · · · · · · · · · ·			DO NOT WRITE IN THIS SPACE
U\$		U\$				3. Date Incorporated or Qualified
						01/21/1969
2. Principal P	ace of Business	2a. Mailing Address				4. FEI Number Applied For
21		26				59-1232733 Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				S Cartificate of Status Desired S8.75 Additional
City & City		City & State				Fee Required
City & State		City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
Zip	Country	Zip	Countr			This corporation owes or has paid the current year Intangible
24	25	29	30	•		Personal Property Tax due June 30. X Yes No
	g. Name and Address of Curren			I		10. Name and Address of New Registered Agent
PAULK, GINGER				81	Name	
	5 EAGLE AVENUE		62 Stre		Street A	ddress (P.O. Box Number is Not Acceptable)
	. BOX 844		Ļ			
EAG	BLE LAKE FL 33839			83		
				84	City	85 Zip Code
dd Dysgynati	to the provisions of Pastions 607.050	2 and CO7 1509 Florida Ptate	los the r		named a	FL 10 2.50 Comparison the extrement for the oursess of changing its registered.
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, typed or printed name of registered agent and title it applicable (NOTE Registered Agent signature)					n arulangia te	equired when reinstating) DATE
12.	OFFICERS AND	D DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	P DELETE		1.1 T	1.1 TITLE		Change Addition
PAULK, ODESSA V.			1.2 NAM			
STREET ADDRESS	3005 PLANTATION ROAD SE				ADDRESS	
CITY-ST-ZIP	WINTER HAVEN FL			1.4 CITY - ST - ZIP 2.1 TITLE		Change Addition
TITLE NAME	_			2.1 III.CE 2.2 NAME		
STREET ADDRESS	PAULK, GINGER SUE 1435 EAGLE AVENUE				ADDRESS	· ·
CITY-ST-ZIP	EAGLE LAKE FL				T-ZIP	
TITLE	DELETE		_	3.1 TITLE		Change Addition
NAME			3.2 NAM			
STREET ADDRESS			3.3 9	STREET /	ADDRESS	
CITY - SI - ZIP				CITY-S	r-zip	
TITLE			☐ DELETE 4.1 TI			☐ Change ☐ Addition
NAME			1	NAME		
STREET ADDRESS					ADDRESS	
CITY-ST-ZIP		DELETE	4.4 C	ITY-ST	- ZIP	Change Addition
TITLE NAME			1	MME		Li onange Li Additoli
STREET ADDRESS					ADDRESS	
CITY-ST-ZIP				CITY-ST		
TITLE	DÉLETE			61 TITLE		Change Addition
KAME			621	IAME		
STREET ADDRESS			6.3 5	TREET A	ADDRESS	
CITY-ST-ZIP			6.40	CITY-ST	- ZIP	
14. I hereby o	ertify that the information supplied wi	th this filing does not qualify f	or the ex	empt	on stated	in Section 119.07(3)(i), Florida Statutes. I further certify that the information

indicated on this annual report or supplemental annual report or the 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 12 or Block 13 if changed or on an attachment with an address.