

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE  
Shandra B. Mortman  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **349046** (3)

1. Corporation Name  
**GRIMES GROVES, INC.**



Principal Place of Business: **1023 MANATEE AVE W BRADENTON FL 34205**  
Mailing Address: **1023 MANATEE AVE W BRADENTON FL 34205**

2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified <b>07/09/1969</b>	3a. Date of Last Report <b>02/27/1995</b>
21. Suffix, App. #, etc.	26. Suffix, App. #, etc.	4. FEI Number <b>59-1265086</b>	Applied For Not Applicable
22. City & State	27. City & State	5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required
23. Zip	28. Zip	6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/> \$5.00 May Be Added to Fees
24. Country	29. Country	8. This corporation has liability for intangible tax under s. 190.032, Florida Statutes	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent  
**GRIMES, WILLIAM C  
1023 MANATEE AVE  
BRADENTON FL 34205**

10. Name and Address of New Registered Agent  
81. Name  
82. Street Address (P.O. Box Number is Not Acceptable)  
83.  
84. City **FL** 85. Zip Code

11. Pursuant to the provisions of Sections 607.0012 and 607.1546, 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. Thereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0016, Florida Statutes.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

12. OFFICERS AND DIRECTORS

1. TITLE	STD	<input checked="" type="checkbox"/> DELETE
2. NAME	GOEBEL, MARY G	
3. STREET ADDRESS	1023 MANATEE AVE W BRADENTON, FL 00000	
4. CITY-STATE	VD	<input type="checkbox"/> DELETE
5. NAME	GRIMES, CALEB J	
6. STREET ADDRESS	1023 MANATEE AVE W BRADENTON, FL 00000	
7. CITY-STATE	PD	<input type="checkbox"/> DELETE
8. NAME	GRIMES, WILLIAM C	
9. STREET ADDRESS	1023 MANATEE AVE W BRADENTON, FL 00000	
10. CITY-STATE	D	<input checked="" type="checkbox"/> DELETE
11. NAME	HOPKINS, ELIZABETH G.	
12. STREET ADDRESS	1023 MANATEE AVE W BRADENTON, FL 00000	
13. CITY-STATE	D	<input type="checkbox"/> DELETE
14. NAME	GRIMES, JANET C	
15. STREET ADDRESS	1023 MANATEE AVE W BRADENTON, FL 00000	
16. CITY-STATE		<input type="checkbox"/> DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	STD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2. NAME	William A. Theroux	
3. STREET ADDRESS	4903 Palm Aire Drive Sarasota, FL 34243	
4. CITY-STATE	VD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5. NAME	Maureen G. Theroux	
6. STREET ADDRESS	4903 Palm Aire Drive Sarasota, FL 34243	
7. CITY-STATE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
8. NAME	Michele B. Grimes	
9. STREET ADDRESS	1023 Manatee Avenue West Bradenton, FL 34205	
10. CITY-STATE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
11. NAME		
12. STREET ADDRESS		
13. CITY-STATE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
14. NAME		
15. STREET ADDRESS		
16. CITY-STATE		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *M. C. Grimes* President

CR2E034 (12/95)