## **2000 UNIFORM BUSINESS REPORT (UBR)**

## FILED **DOCUMENT # 349046** Jan 19, 2000 8:00 am Secretary of State 1. Entity Name GRIMES GROVES, INC. 01-19-2000 90186 010 \*\*\*150.00 Principal Place of Business Mailing Address 1023 MANATEE AVE W 1023 MANATEE AVE W **BRADENTON FL 34205 BRADENTON FL 34205-7816** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 59-1265086 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent GRIMES, WILLIAM C Street Address (P.O. Box Number is Not Acceptable) 1023 MANATEE AVE **BRADENTON FL 34205** Zip Code 8. 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 DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. STD TITLE ☐ Change ☐ Addition TITL F Delete THEROUX, WILLIAM A NAME NAME STREET ADDRESS STREET ADDRESS 4903 PALM AIRE DRIVE CITY-ST-ZIP CITY-ST-ZIP SARASOTA FL ☐ Change ☐ Addition ☐ Delete TITLE GRIMES, CALEB J NAME NAME STREET ADDRESS STREET ADDRESS 1023 MANATEE AVE W CITY-ST-7IP CITY-ST-ZIP BRADENTON, FL 00000 ☐ Change ☐ Addition ☐ Delete GRIMES, WILLIAM C. NAME NAME STREET ADDRESS STREET ADDRESS 1023 MANATEE AVE W CITY-ST-ZIP CITY-ST-ZIP BRADENTON, FL 00000 Addition Change Delete TITLE TITLE THEROUX, MAUREEN G NAME NAME STREET ADDRESS 4903 PALM AIRE DRIVE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP SARASOTA FL TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME GRIMES, JANET C NAME STREET ADDRESS STREET ADDRESS 1023 MANATEE AVE W CITY-ST-ZIP CITY-ST-ZIP BRADENTON, FL 00000 Change ☐ Addition ☐ Delete TITLE TITLE NAME GRIMES, MICHELE B NAME STREET ADDRESS STREET ADDRESS 1023 MANATEE AVENUE WEST CITY-ST-ZIP CITY-ST-ZIP **BRADENTON FL**

13. I hereby certify that the information supplied with this filing does not qualify 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: \_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OF DIRECTOR