

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 374927

FILED  
Mar 18, 2009  
Secretary of State

Entity Name: PLACID ACRES GROVES, INC.

## Current Principal Place of Business:

1125 PEACHTREE DRIVE  
LAKE PLACID, FL 33852

## New Principal Place of Business:

## Current Mailing Address:

1125 PEACHTREE DRIVE  
LAKE PLACID, FL 33852

## New Mailing Address:

FEI Number: 59-1315050

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DURRANCE, DANIEL C  
1125 PEACHTREE DRIVE  
LAKE PLACID, FL 33852 US

## Name and Address of New Registered Agent:

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: VSD ( ) Delete  
Name: ROSS, SUE D,  
Address: 101 VIA AMALFI  
City-St-Zip: NEW SMYRNA BEACH, FL

Title: PD ( ) Delete  
Name: DURRANCE, DANIEL C,  
Address: 1125 PEACHTREE DR.  
City-St-Zip: LAKE PLACID, FL

Title: D ( ) Delete  
Name: DURRANCE, KATHRYN P  
Address: 1125 PEACHTREE DR  
City-St-Zip: LAKE PLACID, FL 33852

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VSD (X) Change ( ) Addition  
Name: ROSS, SUE D,  
Address: 101 VIA AMALFI  
City-St-Zip: NEW SMYRNA BEACH, FL 32169 US

Title: PD (X) Change ( ) Addition  
Name: DURRANCE, DANIEL C,  
Address: 1125 PEACHTREE DR.  
City-St-Zip: LAKE PLACID, FL 33852 US

Title: D (X) Change ( ) Addition  
Name: DURRANCE, KATHRYN P  
Address: 1125 PEACHTREE DR  
City-St-Zip: LAKE PLACID, FL 33852 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: DANIEL C. DURRANCE

PD

03/18/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date