2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 393957

Entity Name: J. HENRY GROVES, INC.

FILED Feb 24, 2009 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Current Principal Place of Business: New Principal Place of Business:

209 NW FIRST STREET
P.O.BOX 547
FORT MEADE, FL 33841

209 NW FIRST STREET
FORT MEADE, FL 338410547

Current Mailing Address: New Mailing Address:

 209 NW FIRST STREET
 209 NW FIRST STREET

 P.O.BOX 547
 P.O.BOX 547

 FORT MEADE, FL 33841
 FORT MEADE, FL 338410547

FEI Number: 59-1429642 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

GRUNHOLZER, JAMES H.

ROUTE 1, BOX 28 C

FORT MEADE, FL 33841 US

GRUNHOLZER, JAMES H

ROUTE 1, BOX 28 C

FORT MEADE, FL 33841 US

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: JAMES H GRUNHOLZER 02/24/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title:

PD () Delete Title: PD (X) Change () Addition

 Name:
 GRUNHOLZER, JAMES H,
 Name:
 GRUNHOLZER, JAMES H

 Address:
 209 NW FIRST STREET
 Address:
 209 NW FIRST STREET

 City-St-Zip:
 FORT MEADE, FL
 33841

() Delete Title: Title: (X) Change () Addition GRUNHOLZER, JAMES H., , JR Name: Name: GRUNHOLZER, JAMES H., , JR 209 N.W. FIRST STREET 209 N.W. FIRST STREET Address: Address: FORT MEADE, FL FORT MEADE, FL 33841 City-St-Zip: City-St-Zip:

Title: TD () Delete Title: TD (X) Change () Addition Name: GRUNHOLZER,BETTY S., Name: GRUNHOLZER,BETTY S.,

Address: 209 NW FIRST STREET Address: 209 NW FIRST STREET
City-St-Zip: FORT MEADE, FL 33841

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: JAMES H GRUNHOLZER PRES 02/24/2009