## 2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

DO NOT WRITE IN THIS SPACE

## **DOCUMENT #394684**

1. Entity Name

TILDÉN GROVES HOLDING CORP.



Principal Place of Business

C/O SAMPEY & DEXTER, PA 720 RUGBY ST STE 220 ORLANDO, FL 32804-4960 Mailing Address

C/O SAMPEY & DEXTER, PA 720 RUGBY ST STE 220 ORLANDO, FL 32804-4960

## **FILED** Apr 09, 2007 8:00 am Secretary of State

04-09-2007 90064 050 \*\*\*150.00



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No Chg-P

CR2E034 (11/05)

4. FEI Number 59-1368669 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DICKSON, RUSSELL K JR 20 N ORANGE AV SUITE 1500

## DO NOT WRITE

ORLANDO, FL 32801-4624				IN THIS SPACE		
	named entity submits this statement for the ptions of registered agent.	surpose of changing its registe	ered office or re	egistered agent, or bo	oth, in the State of Florida. I am familiar with, and accept	
SIGNATURE.	Signature, typed or printed name of registered agent and title it	f positionals (NOTE: Decist	and Apad siangtura	required when reinstating)	DATE	
FIL After M	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	9. Election Campaign Fin Trust Fund Contributio	nancing	\$5.00 May Be Added to Fees	DATE .	
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	OFFICERS AND DIRECT PD TILDEN, DOUGLAS F 100 CRABAPPLE LANE CHAPEL HILL, NC 27514 VD BIGELOW, LYDIA T. 906 NW 36TH ROAD GAINESVILLE, FL 326092105	CTORS		DO NOT WRITE		
NAME STREET ADDRESS CITY-ST-ZIP	VAUGHAN, JOANNE D.					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD MATHEWS, CAROL 211 NORTH DILLARD STREET WINTER GARDEN, FL 347872813			IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE						

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate 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 10 or Block 11 if chapted or on a state finally with an Address Suitball other like empowered.

SIGNATURE:

NAME STREET ADDRESS CITY-ST-ZIP

> Wagelas RE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR