

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 412329

FILED
Feb 04, 2009
Secretary of State

Entity Name: A. ROY HOGAN GROVES, INC.

Current Principal Place of Business:

15 TARPON DR
PO BOX 6474
VERO BCH, FL 329616474

New Principal Place of Business:

15 TARPON DR
VERO BCH, FL 329616474

Current Mailing Address:

15 TARPON DR
PO BOX 6474
VERO BCH, FL 329616474

New Mailing Address:

FEI Number: 59-1456503 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOGAN, A. ROY
15 TARPON DRIVE
VERO BEACH, FL 32960 US

Name and Address of New Registered Agent:

HOGAN, THOMAS D.
15 TARPON DRIVE
VERO BEACH, FL 32960 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: THOMAS D. HOGAN

02/04/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: HOGAN, THOMAS D
Address: 26 SEAHORSE LANE
City-St-Zip: VERO BCH, FL 00000,

Title: STD () Delete
Name: HOGAN, DOROTHY S
Address: 15 TARPON DR
City-St-Zip: VERO BEACH, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: HOGAN, THOMAS D
Address: 26 SEAHORSE LANE
City-St-Zip: VERO BCH, FL 32960

Title: STD (X) Change () Addition
Name: HOGAN, DOROTHY S
Address: 15 TARPON DR
City-St-Zip: VERO BEACH, FL 32960

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: THOMAS D. HOGAN

PD

02/04/2009

Electronic Signature of Signing Officer or Director

Date