

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 19, 2007 8:00 am
Secretary of State

04-19-2007 90183 018 ***150.00

DOCUMENT #413677 1. Entity Name LIER GROVES, INC.			
Principal Place of Business 3375 20TH STREET, SUITE 120 VERO BCH, FL 32960 US		Mailing Address 3375 20TH STREET SUITE 120 VERO BCH, FL 32960 US	
2. Principal Place of Business - No P.O. Box # 1850 43rd AVE		3. Mailing Address 1850 43rd AVE	
Suite, Apt. #, etc. UNIT C-3		Suite, Apt. #, etc. UNIT C-3	
City & State VERO BEACH FL		City & State VERO BEACH FL	
Zip 32960	Country US	Zip 32960	Country US
4. FEI Number 59-1427771		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent LIER, PETER E 2502 PINE AVE. VERO BEACH, FL 32960		7. Name and Address of New Registered Agent Name JOHN J. LIER Street Address (P.O. Box Number is Not Acceptable) 5926 RIDGE LAKE CIRCLE City VERO BEACH FL Zip Code 32967	
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. I am familiar with, and accept the obligations of, registered agent. SIGNATURE <i>[Signature]</i> President 4-13-07 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD LIER, JULIE 2502 PINE AVE VERO BEACH, FL 32960 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD LIER, PETER E. 2502 PINE AVE. VERO BEACH, FL 32960 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD LIER, JOHN J. THREE MICHAEL CREEK DR VERO BEACH, FL 32963 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD JOHN J. LIER 5926 RIDGE LAKE CIRCLE VERO BEACH FL 32967 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LIER, JUDITH M 3819 STONEMONT DR. COCOA BEACH, FL 32926 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LIER, BEVERLY 3 MICHAEL CREEK DR VERO BEACH, FL 32963 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD BEVERLY LIER 5926 RIDGE LAKE CIRCLE VERO BEACH FL 32967 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KATELIN LIER 5926 RIDGE LAKE CIRCLE VERO BEACH FL 32967 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: <i>[Signature]</i> President		4-13-07	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date Daytime Phone #</small>	

ATTACHMENT
40068983
413677

Block 11. Addition to existing Officers/Directors

Title: D
Name: Mattisen Lier
St Address: 5926 Ridge Lake Circle
City-St-Zip: Vero Beach FL 32967

for president