2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # 415082

1. Entity Name
BLOCKER GROVES, INC.

Principal Place of Business
33831 BLANTON RD
DADE CITY, FL 33523

Mailing Address
33831 BLANTON RD
DADE CITY, FL 33523

DO NOT WRITE IN THIS SPACE

04272006   No Chg-P   CR2E034 (11/05)

4. FEI Number	Applied For
59-1465170	Not Applicable

5. Certificate of Status Desired ☐   **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

BLOCKER, NORMAN E.
33831 BLANTON RD
DADE CITY, FL 33523

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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 _____

Signature, typed or printed name of registered agent and title if applicable.   (NOTE. Registered Agent signature required when reinstating]   DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2006 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐   **$5.00** May Be Added to Fees

10.	OFFICERS AND DIRECTORS	
TITLE	PD	
NAME	BLOCKER, NORMAN E.	
STREET ADDRESS	33831 BLANTON RD	
CITY-ST-ZIP	DADE CITY, FL 33523	
TITLE	STD	
NAME	BLOCKER, LORA LEE	
STREET ADDRESS	33831 BLANTON RD	
CITY-ST-ZIP	DADE CITY, FL 33523	
TITLE		
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		
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TITLE		
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

U00800544263
05/11/06-80029-008 150.00

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IN THIS SPACE

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: _Norman Blocker_   Norman Blocker   4/25/06   (352) 561-3915

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #