

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 458440

Entity Name: GRIMSLEY GROVES, INC.

FILED  
Feb 26, 2009  
Secretary of State

## Current Principal Place of Business:

515 SOUTH SIXTH AVENUE  
WAUCHULA, FL 33873

## New Principal Place of Business:

1575 MOORE ROAD  
ZOLFO SPRINGS, FL 33890

## Current Mailing Address:

515 SOUTH SIXTH AVENUE  
PO BOX 728  
WAUCHULA, FL 33873

## New Mailing Address:

1575 MOORE ROAD  
ZOLFO SPRINGS, FL 33890

FEI Number: 59-1546030

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GRIMSLEY, CHARLES M.  
729 CATFISH CREEK ROAD  
LAKE PLACID, FL 33852 US

## Name and Address of New Registered Agent:

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: SD ( ) Delete  
Name: GRIMSLEY, PATRICIA C.  
Address: 729 CATFISH CREEK ROAD  
City-St-Zip: LAKE PLACID, FL 33852

Title: VD ( ) Delete  
Name: GRIMSLEY, DENISE  
Address: 19 SUNSET LANE  
City-St-Zip: LAKE PLACID, FL 33852

Title: PD ( ) Delete  
Name: GRIMSLEY, CHARLES,  
Address: 729 CATFISH CREEK ROAD  
City-St-Zip: LAKE PLACID, FL 33852

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: DENISE GRIMSLEY

VD

02/26/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date