

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 536645

FILED
Apr 27, 2009
Secretary of State

Entity Name: GROVE EQUIPMENT SERVICE, INC.

Current Principal Place of Business:

5905 ST. RD 60E
BARTOW, FL 33830

New Principal Place of Business:

Current Mailing Address:

PO BOX 68
ALTURAS, FL 33820

New Mailing Address:

5905 ST. RD 60E
BARTOW, FL 33830

FEI Number: 59-1753831

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MC KEEMAN, DAVID W.
5905 SR 60 E
BARTOW, FL 33830 US

Name and Address of New Registered Agent:

MCKEEMAN, DAVID W.
5905 SR 60 E
BARTOW, FL 33830 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: DAVID W. MCKEEMAN

04/27/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: STD () Delete
Name: MCKEEMAN ERMA M.
Address: 740 OHLINGER ROAD
City-St-Zip: BABSON PARK, FL 00000,

Title: PD () Delete
Name: MCKEEMAN, DAVID W.
Address: 211 CATHERINE AVENUE
City-St-Zip: BABSON PARK, FL 00000,

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: STD (X) Change () Addition
Name: MCKEEMAN, DAVID W
Address: 211 CATHERIN AVE
City-St-Zip: BABSON PARK,, FL 33827

Title: PD (X) Change () Addition
Name: MCKEEMAN, DAVID W.
Address: 211 CATHERINE AVENUE
City-St-Zip: BABSON PARK,, FL 33827

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: DAVID W. MCKEEMAN

PD

04/27/2009

Electronic Signature of Signing Officer or Director

Date