2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 539354

Address:

City-St-Zip:

P.O. BOX 4785

THOUSAND OAKS, CA 91359 US

Entity Name: SANTA ROSA GROVES INC.

FILED Jan 05, 2009 Secretary of State

Littly Na	IIIE. SANTAT	ROOA GROVES, INC.			
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	TROPICAL V ION, FL 3331				
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
PO BOX 4 THOUSAN	785 ND OAKS, CA	91359			
FEI Number	: 59-1918829	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of	Current Registered Agent:	Name and Address of	ne and Address of New Registered Agent:	
1211 THE SINGER IS The above	SLAND, FL 33		ourpose of changing its registere	d office or registered agent, or both,	
SIGNATU	RE:				
Electronic Signature of Registered Agent			ent	Date	
Election Car	mpaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	RICCOBONO, P O BOX 4785		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	BATUR, ANTO P.O. BOX 478		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	VD (RICCOBONO,) Delete SIMONE	Title: Name:	() Change () Addition	

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.

Address:

City-St-Zip:

SIGNATURE: SIMONE RICCOBONO Ρ 01/05/2009