2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 568786

Entity Name: REPPARD GROVES, INC.

FILED Jan 15, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
Current Finicipal Flace of Dusiness.	New Fillicipal Flace Of Dusiliess.

660 BCHLAND BLVD STE 301 660 BEACHLAND BLVD. VERO BEACH, FL 32963

SUITE 301

VERO BEACH, FL 32963 US

Current Mailing Address: New Mailing Address:

660 BEACHLAND BLVD. 660 BCHLAND BLVD STE 301

VERO BEACH, FL 32963 SUITE 301 US

VERO BEACH, FL 32963 US

FEI Number: 59-1810403 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

EVANS, J. EMMETT III EVANS, J. EMMETT III 660 BEACHLAND BLVD. 660 BCHLAND BLVD STE 301

VERO BEACH, FL 32963 SUITE 301

VERO BEACH, FL 32963 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: J. EMMETT EVANS, III 01/15/2009

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition

EVANS, JAMES E EVANS, JAMES E JR Name: Name: 14314 HALE ROAD 14314 HALE ROAD Address: Address: City-St-Zip: DADE CITY, FL 33523 US City-St-Zip: DADE CITY, FL 33523 US

Title: PTD () Delete Title: () Change () Addition

Name: REPPARD JONES, EVELYN Name: 12 ALPINE Address: Address: NEWNAN, GA 30268 City-St-Zip: City-St-Zip:

VPSD Title: Title: () Delete () Change () Addition

EVANS, J. EMMETT III Name: Name: 660 BCHLAND BLVD STE 301 Address: Address: City-St-Zip: VERO BEACH, FL 32963 City-St-Zip:

Title: () Delete Title: () Change () Addition

SULLIVAN, JOHN C Name: Name: Address: 2555 PONCE DE LEON BLVD STE 300 Address: City-St-Zip: MIAMI, FL 33134 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: J. EMMETT EVANS, III **VPSD** 01/15/2009