

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 580658

Entity Name: M & J GROVES, INC.

FILED
Jan 15, 2009
Secretary of State

Current Principal Place of Business:

CORNER OF S.R. 42 & COUNTY RD. 450
P O BOX 661
UMATILLA, FL 32784

New Principal Place of Business:

CORNER OF S.R. 42 & COUNTY RD. 450
UMATILLA, FL 32784

Current Mailing Address:

CORNER OF S.R. 42 & COUNTY RD. 450
P O BOX 661
UMATILLA, FL 32784

New Mailing Address:

FEI Number: 59-1835938 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STRICKLEN, MARGARET B.
20020 E HWY 42
UMATILLA, FL 32784 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: PD () Delete
Name: STRICKLEN, MARGARET, B.
Address: S.R. 42 & COUNTY RD 450
City-St-Zip: UMATILLA, FL

Title: T () Delete
Name: STRICKLEN, MARGO JAN,
Address: SR 42 & COUNTY RD 450
City-St-Zip: UMATILLA FL,

Title: S () Delete
Name: STRICKLEN, LINDA JOY,
Address: SR 42 & COUNTY RD 450
City-St-Zip: UMATILLA FL,

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: MARGARET B. STRICKLEN

PD

01/15/2009

Electronic Signature of Signing Officer or Director

Date