*2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

DOCUMENT # 646466

1. Entity Name

R.D. GROVE ENTERPRISES, INC.



FILED May 03, 2004 8:00 am Secretary of State

05-03-2004 90763 041 ***150.00

R.D. GROVE ENTERPRISES, INC.								
Principal Place of Business 1626-90TH AVENUE P.O. BOX 370 VERO BEACH FL 32961-7370		Mailing Address 1626-90TH AVENUE P.O. BOX 370 VERO BEACH FL 32961-7370						
2. Principal Place of Business		3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.			MOORE CR2E03	34 (11/03)		
City & State		City & State		- <u>-</u>	4. FEI Number 59-1948859	<u> </u>	plied For t Applicable	
Zip	Country	Zip	Zip Country		5. Certificate of Status Desired	\$8.75 Add Fee Required		
	6. Name and Address of Current	Registered Agent			7. Name and Address of New Registere	d Agent		
			Name	Name				
RICHARDSON, DANFORTH K 1626-90TH AVENUE VERO BEACH FL 32966			Street Ad	idress (F	ress (P.O. Box Number is Not Acceptable)			
			City		· F	Zíp Code	e	
8. 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. I am familiar with, and accept the obligations of registered agent.								
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE								
	signature, typed or printed name or registered agent	and the irappicable. (NOTE.	negisiereo Agent signat.	- required	waterreasiang)	-		
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Make Check Payable to Florida Department of State					Election Campaign Financing Trust Fund Contribution.		0 May Be I to Fees	
10.	OFFICERS AND	100200000000000000000000000000000000000	11.		ADDITIONS/CHANGES TO OFFICERS A	NO DIBECTORS	S IN 11	
	43/3	Delete	TITLE	VP	7,00110710707071100071	☐ Change	Addition	
TITLE "", 3	RICHARDSON, D.K.	Delete	NAME	Cal	au Rust	Change	Z.S. Addition	
I		• •		404	Z ZZED AVE. S.W.			
STREET ADDRESS	1855 28TH AVENUE		STREET ADDRESS	1/	es BEACH, FL 329	68		
CITY-ST-ZIP	VERO BEACH FL 32960		CITY-ST-ZIP	Ver	W THEREN, PC SA			
TITLE	AS	Delete	TITLE	Pre	esident	Change	☐ Addition	
NAME	KAHLE, GEORGE A.		NAME		ther John M.			
	6020 S.W. 5TH ST.		STREET ADDRESS		26 90th Avenue			
CITY-ST-ZIP	VERO BEACH FL 32968		CITY-ST-ZIP	Ve	ro Beach, FL 32966			
TITLE	5 ν	🔀 Delete	TITLE		•	☐ Change	☐ Addition	
NAME	LUTHER, JOHN M.		NAME .					
STREET ADDRESS	SOUTH:A1A, BX. 370		- STREET ADDRESS	:				
CITY - ST - ZIP	VERO BEACH FL 32963		CITY-ST-ZIP		·			
TITLE	T	Delete	TITLE			☐ Change	☐ Addition	
NAME	PEREZ, T. RENE	/~	NAME				-	
STREET ADDRESS	2019 CORTEZ AVENUE		STREET ADDRESS					
City-St-ZIP	VERO BEACH FL 32960		CITY-ST-ZIP					
TITLE	VP	Delete	TITLE			☐ Change	Addition	
NAME	ROBY, DAVID A.	ES Delete	NAME		•			
STREET ADDRESS	1626-90TH AVENUE		STREET ADDRESS	İ				
CITY-ST-ZIP	VERO BCH. FL 32966		CITY-ST-ZIP					
		m				Change:	Addition	
TITLE		☐ Delete	TITLE			☐ Change	☐ MODITION	
NAME			NAME		,			
STREET ADDRESS			STREET ADDRESS				Ì	
CITY-ST-ZIP			CITY-ST-ZIP	L				
12. I bereby o	certify that the information supplied wit	h this filing does not qualify for	the exemption sta-	ted in Se	ection 119.07(3)(i), Florida Statutes, I further	certify that the in	ntormation	

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28/04

772-567-1151

Daytime Phone #