

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 660949

Entity Name: F & J GROVES, INC.

**FILED**  
**Mar 08, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

650 E BAY AVE  
LONGWOOD, FL 327520087 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 520087  
PO BOX 87  
LONGWOOD, FL 327520087 US

**New Mailing Address:**

FEI Number: 59-1997924

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BISTLINE, JOHN A  
470 VILLAGE PLACE  
LONGWOOD, FL 32779 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

**OFFICERS AND DIRECTORS:**

Title: PTD  
Name: BISTLINE, JOHN A JR  
Address: 470 VILLAGE PL # 216  
City-St-Zip: LONGWOOD, FL 32779

Title: VPSD  
Name: BISTLINE, CAROLYN  
Address: 650 E. BAY AVE.  
City-St-Zip: LONGWOOD, FL

I hereby 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 all other like empowered.

SIGNATURE: JOHN A. BISTLINE

PRES

03/08/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date