

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 695069

Entity Name: TLC GROVES, INC.

FILED  
May 18, 2012  
Secretary of State

**Current Principal Place of Business:**

1023 EUCLID LN.  
PORT SAINT LUCIE, FL 34983

**New Principal Place of Business:**

**Current Mailing Address:**

1023 EUCLID LN.  
PORT SAINT LUCIE, FL 34983

**New Mailing Address:**

FEI Number: 59-2155677

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ORR, ROGER G  
1021 SW SUTAN DR  
PORT SAINT LUCIE, FL 34953 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: PD  
Name: ORR, SYLVIA D  
Address: 2912 BRIMAC  
City-St-Zip: FORT PIERCE, FL 34981

Title: DT  
Name: ORR, A D, JR  
Address: 1023 EUCLID LANE  
City-St-Zip: PORT SAINT LUCIE, FL 34983

Title: DS  
Name: ORR, ROGER G  
Address: 1021 SW SUTAN DR  
City-St-Zip: PORT SAINT LUCIE, FL 34953

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: ROGER G. ORR

SECR

05/18/2012

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

\_\_\_\_\_ Date