

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F18060

Entity Name: LEWIS GROVES, INC.

FILED
May 15, 2009
Secretary of State

Current Principal Place of Business:

127 NE 1ST ST
FT. MEADE, FL 33841

New Principal Place of Business:

Current Mailing Address:

127 NE 1ST ST
FT. MEADE, FL 33841

New Mailing Address:

FEI Number: 59-2121442

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HAMILTON, PAUL
127 NE FIRS STREET
FORT MEADE, FL 33841 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HAMILTON, PAUL
Address: 1355 SPRING COURT
City-St-Zip: BARTOW, FL 33830

Title: V () Delete
Name: GNANN, GARY W.
Address: 154 FOSTER LANE
City-St-Zip: PITTSBORO, NC

Title: V () Delete
Name: CASON, RICHARD G.
Address: 115 N PINE AVENUE
City-St-Zip: FORT MEADE, FL 33841

Title: S () Delete
Name: HAMILTON, SHARON
Address: 1355 SPRING CT
City-St-Zip: BARTOW, FL 33830

Title: T () Delete
Name: CASON, SONDRA
Address: 115 W PINE AVE
City-St-Zip: FORT MEADE, FL 33841

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:

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: PAUL W. HAMILTON

P

05/15/2009

Electronic Signature of Signing Officer or Director

Date