## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 23, 2007 08:00 AN
Secretary of State

1. Entity Nam	MENT # F66627 grove service, INC.			***************************************	Secretary of Star
Principal Place 3915 1ST ST VERO BCH, F		Mailing Address 3915 1ST ST, SW VERO BCH, FL 32968-9415		**************************************	m 1865) m 1875) m 1875) m 1811 2 2004   1868) f 1818 (1815   1818) 1   1818 (1815   1818) 1
D	O NOT WRITE  6. Name and Address of Current Re		CE	05042007 4. FEI Number 59-219	
MCKENZIE, R, DAVID, III 1055 31ST AVENUE VERO BEACH, FL 32968			DO NOT WRITE IN THIS SPACE		
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 Sgnature, typod or printed name of registered agent and fille if applicable. (NOTE Registered Agent signature required when reinstating)  DATE					
FILE NOWILL FEE IS \$150.00  Due by September 14, 2007  9. Election Campaign Finan Trust Fund Contribution.				.00 May Be led to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	P MCKENZIE, R. DAVID I 1055 31 AVE VERO BCH, FL V MCKENZIE, KATHARINE E. 300 LONGWOOD DR	RECTORS			U00000772606 08/23/07-80001-021 150.00
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP  RITLE NAME STREET ADDRESS CITY-ST-ZIP	SEDONA, AZ  VP  EDSALL, ROBERT S. J  556 CÂMELIA LANE  VERO BEACH, FL 32963	DO NOT WRITE IN THIS SPACE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
Title Name Street address City-St-Zip					·
12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 907, 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: K. David McKenzie III 8/16/07 772-562-3724 SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF FRONTING OFFICER OR DIRECTOR  Caytime Phone 4					