

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
**Sandra B. Mortham**  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **F85981** (1)  
1. Corporation Name  
**G & G GROVES, INC.**

Principal Place of Business

Mailing Address

C/O ALICE A. GRIMES  
4155 FOREST DRIVE  
MULBERRY FL 33860

C/O ALICE A. GRIMES  
4155 FOREST DRIVE  
MULBERRY FL 33860

**FILED**

98 JUL 29 PM 12:01

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/18/1982

4. FEI Number

59-2200826

Applied For  
Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐ \$5.00 May Be  
Added to Fees

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30.

☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

GRIMES, ALICE A.  
4155 FOREST DRIVE  
MULBERRY FL 33860

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **D** ☐ DELETE  
NAME **GRIMES, ALICE A**  
STREET ADDRESS **4155 FOREST DR**  
CITY-ST-ZIP **MULBERRY, FL 33860**

1.1 TITLE **D/S/T** ☐ Change ☒ Addition  
1.2 NAME **Same address**  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

TITLE **PD** ☐ DELETE  
NAME **GRIMES, PAUL S**  
STREET ADDRESS **8013 FISHER DR**  
CITY-ST-ZIP **JONESBORO GA 30236**

2.1 TITLE **Grimes, Paul S** ☐ Change ☒ Addition  
2.2 NAME **8013 Fisher Dr.**  
2.3 STREET ADDRESS **Jonesboro, GA**  
2.4 CITY-ST-ZIP **30236**

TITLE **D** ☐ DELETE  
NAME **GRIMES, ELIZABETH L**  
STREET ADDRESS **8013 FISHER DR**  
CITY-ST-ZIP **JONESBORO GA 30236**

3.1 TITLE **D/VP** ☐ Change ☒ Addition  
3.2 NAME **SAME**  
3.3 STREET ADDRESS **30236**  
3.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS **600002608126--9**  
4.4 CITY-ST-ZIP **08/05/98--01075--022**

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

5.1 TITLE **\*\*\*\*150.00** ☐ Change ☒ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS **1396192 7/31 two pages**  
6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath. 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

*Alice A. Grimes*

6/12/98-425-3981

CR2E034 (10/97)

**Mrs. Alice A. Grimes  
4155 Forest Drive  
Mulberry, Florida 33860-9753  
941-425-3981**

**July 19, 1998**

**Florida Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314**

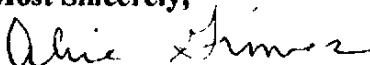
**To whom it may concern;**

**I am returning my Corporation Tax forms for 1998 as you requested in your letter of June 18th. I have added Zip Codes as requested, and the street number and name for Paul Grimes. Please note the addition of office titles to each name.**

**I called the 850-488-9000 number when I realized that my forms were going to be late. I explained that I had a brother who was in a near death situation with an abdominal aneurysm. His subsequent surgery necessitated several trips weekly to Naples, Florida to take my mother to visit him. I am the executor of his estate; there were lots of things to attend to in his behalf. I was very busy the month of April and May. I simply forgot about the corporation's annual report (in the 'business drawer') until after its due date. (I really thought the due date was June 1st).**

**Please accept this letter and the enclosed \$150.00 as payment for G&G Groves, Inc.'s 1998 Corporation Fees. Thank you for all consideration in this matter.**

**Most Sincerely,**



**Alice Grimes**