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2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

DOCUMENT # G01376				FILED
1. Entity Name FRANK BATES GROVES, INC.				00 JUN 29 AM 11: 59
			_	SECRETARY OF STAFF
Principal Plac	ce of Business .	Mailing Address		SECRETARY OF STATE. THE EMPLASSEE, PLORIDA
9160 US #1 Schastian, Pl P.O. BOX 650448 WABASSO FL 32970 WABASSO FL 32970 NO Mail NO Mail ALL Mail) (40)(1)) 40)(80)(80)(4) 40)2 (1)2) (20)0 4()) (40)(8)4() (40)(8)4() (40)(8)4() (40)(8)
2. Principal Place of Business		3. Mailing Address		
Suite, Apt. #, etc.		Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE
City & State		City & State		4. FEI Number 59-2221550 Applied For Not Applicable
Zip	Country	Zíp	Country	5. Certificate of Status Desired \$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent			Name	7. Name and Address of New Registered Agent
DELLERMAN, THOMAS M 9160 US #1 -WABASSO FL 32970				ress (P.O. Box Number is Not Acceptable)
_	Lloastian, Fl. 32958	}	City	FL Zip Code
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.				
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE				
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. After SEPTEMBER 13, 2000 Make Check Payable to De			, 2000 Min. will be	
11.	OFFICERS AND D	DIRECTORS	12.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PST DELLERMAN, THOMAS MARK P.O. BOX 650448 N/A VERO BEACH FL 32965	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change Addition 4000033277241 -07/19/0001050023 ****150.00 ****150.00 *
TITLE (5) NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change Addition 4000033277241 -07/19/0001050024
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	*******8.75 ************************************
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Charles ☐ Addition
indicated	on this report or supplemental report is t	rue and accurate and that my	eignature chall have	in Section 119.07(3)(i), Florida Statutes. I further certify that the informatic net the same legal effect as if made under oath; that I am an officer or director of 607, Florida Statutes; and that my name appears in Block 11 or Block 1

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Frank Bates Groves, Inc. P.O. Box 650448 Vero Beach, Florida 32965

Florida Department of State Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314 Attention; Tyrone

July 10, 2000

Please find the completed UBR report for the above corporation. I contacted the department on July 7th concerning that the corporation had not received it's UBR form or any notice for renewal. Subsequent to that conversation the assistant mailed the attached 'Second Notice' form. It should be noted that this is the first and only notice received by said corporation. On that basis, I would request that the penalty be abated or waived. I have enclosed the renewal fee of \$150.00 dollars, and \$8.75 for Certificate of Status (good-standing) to be returned to said Post Office Box shown above.

The assistant advised on Friday July 7th that said prior forms may have been mailed to 9160 US Hwy 1, Sebastian, Fl. (Mail cannot be received at this address) All mail, notices, renewals should be sent to P.O. Box 650448, Vero Beach, Fl. 32965-0448

Should you have any questions, please call my cellular at 561-538-6066.

Truly yours,

Thomas Mark Dellerman, President