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

**PROFIT** CORPORATION ANNUAL REPORT

1999

DOCUMENT #

1. Corporation Name



G77925

FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

## Mar 14, 1999 8:00 am Secretary of State Katherine Harris

03-14-1999 90023 048 \*\*\*158.75

| GROSVE   | nor Building Services   | S, INC.                      |                     |        |                    |  |   | ļ        |
|--|---|------------------------------|---------------------|--------|--------------------|--|---|----------|
| Principal Place of Business Mailing Address  |   |                              |                     |        |                    | 1 ISBNIST DEST LIBERT LIBERE SBUID LIBERT SING STATE STATE STATE   | it ütüti bibir aturi ism                | ļ        |
| 3398 PARKWAY CENTER CT. ORLANDO FL 32808  3398 PARKWAY CENTER CT. ORLANDO FL 32808                                 |   |                              |                     |        |                    | DO NOT WRITE IN THIS SPACE   |   |          |
|  |   |                              |                     |        |                    | 3. Date Incorporated or Qualifed   |   | }        |
|  |   |                              |                     |        |                    | 01/09/1984   |   | _        |
| 2. Principal Pl  | ace of Business   | 2a. Mailing Addres           | s                   |        |                    | 4. FEI Number  | Applied For                             |          |
| 21   |   | 26                           |                     |        |                    | 59-2363375   | Not Applicabl                           | e        |
| Suite, Apt. #, etc.  |   | Suite, Apt. #, e             | Suite, Apt. #, etc. |        |                    | i & Contiforto of Status Desired   left   '  | 3.75 Additional<br>Fee Required         |          |
| City & State   | 9   | City & State                 | City & State        |        |                    |  | 5.00 May Be                             | - 1      |
| 23   |   | 28                           |                     |        |                    | Trust Fund Contribution  | Added to Fees                           | 4        |
| Zip  | Country   | Zip                          |                     | intry  |                    | 8. This corporation owes the current year Intangib   |   |          |
| 24   | 25  | 29                           | 30                  |        |                    | Personal Property Tax.   |   | 4        |
|  | 9. Name and Address of Curre  | nt Registered Agent          |                     | 0.4    |                    | 10. Name and Address of New Registered Agen  | <u> </u>                                | $\dashv$ |
| MC (   | CALILEY DITA  |                              |                     | 81     | Name               |  |   | ĺ        |
|  | Cauley, rita<br>Roadway Ct  |                              |                     | 82     | Street             | dress (P.O. Box Number is Not Acceptable)  |   | _        |
|  | ANDO FL 32803   |                              |                     | 83     |                    | ·  |   | $\dashv$ |
|  |   |                              |                     |        |                    | - los  | Zip Code                                | $\dashv$ |
|  |   |                              |                     | 84     | ,                  | FL 85  |   |          |
| office or re   | to the provisions of Sections 607.05<br>egistered agent, or both, in the State<br>m familiar with, and accept the oblig | e of Florida, Such change    | · was authorized    | ı DV   | tne com            | orporation submits this statement for the purpose of chanation's board of directors. I hereby accept the appointment | jing its registered<br>it as registered |          |
| SIGNATURE  | Street was broad as adjusted many of registered an  | tent and title if applicable | /NOTE: Registered   | Agen   | 1 signature        | uired when reinstating) DATE .   |   | Ì        |
| Signature, typed or printed name of registered agent and title if applicable. (NOTE: F  12. OFFICERS AND DIRECTORS |   |                              | 13.                 | - Agei | it signature       | ADDITIONS/CHANGES TO OFFICERS AND DI   | RECTORS IN 12                           | $\neg$   |
| TITLE  | PT  | ☐ DEL                        |                     | TLE    |                    |  | Change                                  | on       |
| NAME   | MCCAULEY, RITA T  |                              | 1.2 N               | AME    |                    |  |   |          |
| STREET ADDRESS   | 3 BROADWAY CT   |                              | 1.3 ST              | TREET  | ADDRESS            |  |   | - {      |
| CITY-ST-ZIP  | ORLANDO FL  |                              | 14 C                | TY-S   | T-Z <del>I</del> P |  |   | ď        |
| TITLE  | VS  | ☐ DEL                        |                     |        |                    |  | Change                                  | on.      |
| NAME   | MCCAULEY, RITA M  |                              | 2.2 N               | AME    |                    |  |   | 1        |
| STREET ADDRESS   | 3 BROADWAY CT   |                              | 2.3 \$              | TREET  | FADDRESS           |  |   |          |
| CITY-ST-ZIP  | ORLANDO FL  |                              | 2.74 €              | iry-s  | T-ZIP              |  |   |          |
| TITLE  | V   | ☐ DEL                        | ETE 3.1 TI          | TLE    |                    |  | Change                                  | on       |
| NAME   | MCCAULEY, BERNARD   |                              | 3.2 N               | AME    |                    |  |   |          |
| STREET ADDRESS   | 3 BROADWAY CT   |                              | 3.3 \$              | TREET  | T ADDRESS          |  |   | 1        |
| CITY-ST-ZIP  | ORLANDO FL  |                              | 3.4. 0              | XTY-S  | T-ZIP              |  |   | _        |
| TITLE  | V   | ☐ DEL                        | ETE 4.1 TI          | TLE    |                    |  | Change 🔲 Addit                          | on       |
| NAME   | MCCAULEY, DESMOND   |                              | 4. 2 N              | IAME   |                    |  |   |          |
| STREET ADDRESS   | 3 BROADWAY CT   |                              | 4.3 S               | TREET  | TADORESS           |  |   |          |
| CITY-ST-ZIP  | ORLANDO FL  |                              |                     | ITY-S  | T-ZIP              |  |   |          |
| TITLE  |   | □ DEL                        | .ETE 5.1 TI         | ITLE   |                    |  | Change 🔲 Addit                          | on       |
| NAME   |   |                              | 5.2 N               | AME    |                    |  |   | - 1      |
| STREET ADDRESS   |   |                              | 5.3 S               | TREET  | TADDRESS           |  |   |          |
| CITY-ST-ZIP  |   |                              | 5.4 C               | ITY-S  | T-ZIP              |  |   | _        |
| TITLE  |   | ☐ DEL                        | ETE 6.1 Ti          | TLE    |                    |  | Change                                  | on       |
| NAME   |   |                              | 6.2 N               | AME    |                    |  |   |          |
|  | 1   |                              | 638                 | TREET  | T ADDRESS          |  |   | - 1      |

6.4 CITY-ST-ZIP 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; 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all after his property of the corporation of

SIGNATURE:

407 29