## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

J15664 **DOCUMENT #** 

(2)

GROUPER GRABBERS, INC.

Principal Place of Business 3226 RESTELL IN

Mailing Address

3226 RESTFUL LN.



SARASOTA FI		SARASOTA FL 34231		
				3. Date Incorporated or Qualified
2. Principal Plac	ce of Business 4 San Remo Terr	2a. Mailing Address 26 P.O. Box	2547	4. FEI Number Applied For 59-2693274 Not Applicable
21 3544 Suite, Apt. #	, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired S8.75 Additional Fee Required
City & State	rate FL	City & State 28 SA RASOTA	FL	6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees
Zip 24 <b>3423</b>	Country	Zip 29 34230	Country 30 SARASO	8. This corporation has liability for intangible tax under s 199.032, Florida Statutes ☐ Yes ☐ No
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Registered Agent
			81 Name	
Keitel,	MARIANNE		82 Street	Address (P.O. Box Number is Not Acceptable)
3226 RE	STFUL LN.			3544 SAN KOMO TERR
•			83	
SARASO	)TA FL 34231		84 City (	SARASOTA FL 85 Zip Code 9
11. Pursuant to	the provisions of Sections 607.0502	and 607.1508, Florida Statutes	, the above-named co	moration submits this statement for the purpose of changing its registered office
or registere familiar with	ed agent, or both, in the State of Florida h, and accept the obligations of, Section	a. Such change was authorized n 607.0505, Florida Statutes.	by the corporation's	board of directors. I hereby accept the appointment as registe ed agent. I am
	Signature, typed or printed name of registered agent a		: Registered Agent signature re	
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD	DELETE	1. 1 TITLE	All onlings Transfer
NAME	KEITEL, ERIC		1.2 NAME	3544 SAN REMO TERR
STREET ADDRESS	3226 RESTFUL LN.		1.3 STREET ADDRESS	SARASOTA FL 34239
CITY-ST-ZIP	SARASOTA FL STD	DELETE	1.4 CITY - ST - ZIP 2. 1 TITLE	Change Addition
TITLE	KEITEL, MARIANNE S.	[] veter	2.1 MILE 2.2 NAME	<b>4</b>
NAME	3226 RESTFUL LN.		2.2 NAME 2.3 STREET ADDRESS	3544 SAN REMO TERR
STREET ADDRESS	SARASOTA FL			SARASOTA PL. BUZB 9
CHTY - ST - ZIP	OAMOOTA I L	☐ DELETE	24 CHTY-ST-ZIP 3 1 TITLE	Change Addition
TRILE			3.2 NAME	
NAME OTREET ADDRESS			3.3 STREET ADDRESS	
STREET ADDRESS			3.4 CITY - ST - ZIP	
CITY-ST-ZIP TITLE		DELETE	4. 1 TITLE	Change Addition
NAME		<b></b>	4.2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP	·		4.4 CITY - ST - ZIP	
TITLE		☐ DELETE	5 1 TITLE	Change Addition
NAME			52 NAME	
STREET ADDRESS			5 3 STREET ADDRESS	
CITY-S1-ZIP			5 4 CITY-ST-ZIP	
TITLE		DELETE	6. 1 TITLE	☐ Change ☐ Addition
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
0.7V 01 2.0			6.4 CITY - ST - ZIP	
14. I do hereb	y certify that the information supplied v	ith this filing is voluntarily furnis	shed and does not qua	alify for the exemption stated in Section 119.07(3)(k), 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.