

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

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

DOCUMENT # J87282

(6)

95 JUN -7 AM 10:51

1. Corporation Name

TWENTY MILE BEND GROVES, INC.

Principal Place of Business

% MARIA G. MCDOWELL
1551 FORUM PLACE, SUITE 300F
W. PALM BEACH FL 33401

Mailing Address

% MARIA G. MCDOWELL
1551 FORUM PLACE, SUITE 300F
W. PALM BEACH FL 33401

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

08/14/1987

3a. Date of Last Report

03/08/1994

4. FEI Number

65-0012206

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 has liability for intangible tax under S. 119.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

21 22200 St. Rd. 60

Suite, Apt. #, etc.

22

City & State

23 Vero Beach, Florida

24 32966

Country

2a. Mailing Address

26 P. O. Box 2925

Suite, Apt. #, etc.

27

City & State

28 Vero Beach, Florida

29 32961

Country

10. Name and Address of New Registered Agent

81

Name William M. Cobb

82

Street Address (P.O. Box Number is Not Acceptable)
22200 State Road 60

83

84

City Vero Beach

FL

85 Zip Code

32966

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, 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 607.0502, Florida Statutes.

SIGNATURE

William M. Cobb
Signature of the registered agent and, if applicable, the corporation's authorized representative

William M. Cobb
(NOTE: Registered agent signature required on all filings)

5/10/95
DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

PTD
COBB, WILLIAM M.
155 HIDDEN VALLEY ROAD
CODY WY

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

SD
SALES, RONALD
1551 FORUM PL., 300F
W. PALM BEACH FL

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

VD
LEE, W.C.
175 43RD AVENUE
VERO BEACH FL

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY - ST - ZIP

PTD
Cobb, William M.
22200 State Road 60
Vero Beach, Florida 32966

☒ Change ☐ Addition

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY - ST - ZIP

SD
Sales, Ronald
217 Via Linda
Palm Beach, Florida 33480

☒ Change ☐ Addition

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY - ST - ZIP

☐ Change ☐ Addition

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY - ST - ZIP

☐ Change ☐ Addition

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY - ST - ZIP

☐ Change ☐ Addition

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY - ST - ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(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 007, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

William M. Cobb
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

William M. Cobb pres

5/16/95

767-569-4986
Telephone Number