## 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 # J97839

(1)

VENUS GROVE COMPANY, INC.

**FILED** Mar 03 1998 8:00am Secretary of State



Principal Place of Business Mailing Address				a tentiste nice intit tendt intell sitte till bid	il dinii nobil alnii ginii dinii (ha	
* CHARLES P. LYKES, JR.						
106 SW CR721 OKEECHOBEE FL 34974			106 SW CR721 OKEECHOBEE FL 34974		DO NOT WRITE IN THIS STACE	
UNEECHOOSE FE 94874 UNEECHO			NOBEE FL 348/4		DO NOT WRITE IN THIS SPACE  3. Date incorporated or Qualified	
					10/19/1987	
	Place of Business	2a. Mailing Address	s	<del>.</del>	4. FEI Number	Applied For
21		26	26		59-2845229	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, et	tc.		5. Certificate of Status Desired	\$8.75 Additional
22	<del>-</del>	27			5. Certificate of Status Desired	Fee Required
City & State			City & State		6. Election Campaign Financing	\$5.00 May Be
<b>23</b> Zip	Country		Zip Country		Trust Fund Contribution	
24	25	29	30	iuy	<ol><li>This corporation owes or has paid the Personal Property Tax due June 30.</li></ol>	e current year Intangible  Yes No
	9. Name and Address of Curre		30]		10. Name and Address of New Registered Agent	
LYKES, CHARLES P., JR. 81 Name						
108 SW CD701				62 Street Address (P.O. Box Number is Not Acceptable)		
OKEECHOBEE FL 34974-5918				Street Addr	ress (P.O. Box Number is Not Acceptable)	
			Ĭ	33		
			-	on.		100 L 71 O. 4
			ľ	City	Ţ	FL 85 Zip Code
11. Pursuant	to the provisions of Sections 607.05	02 and 607.1508, Florida	Statutes, the ab	ove-named corp	poration submits this statement for the nurno	see 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 a			Agent signature requir		ATE
12.	OFFICERS A	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS	
TITLE	LYKES, CHARLES P., JR.	☐ DELET				Change Addition
NAME	106 SW CR 721		1.2 NAA			
STREET ADDRESS	OKEECHOBEE FL			EET ADDRESS		
CITY-ST-ZIP TITLE	ONLEGIO DE LE	DELET		'-ST-ZIP		☐ Change ☐ Addition
NAME		<u>_</u>	2.2 NAM			
STREET ADDRESS	15			EET ADDRESS		
CITY-ST-ZIP			1	Y-ST-ZIP		
TITLE	<del></del>	DELET				☐ Change ☐ Addition
NAME			3.2 NAM	ιε		·
STREET ADDRESS			3.3 STR	EET ADDRESS		
CITY-ST-ZIP			3.4. CIT	r-ST-ZIP		
TITLE		DELET	E 4.1 TITL	E		Change Addition
NAME			4. 2 NAJ	AE		
STREET ADDRESS			4.3 STR	ET ADDRESS		
CITY-ST-ZIP				-ST-ZIP		·
TITLE		☐ DELET	E 5.1 TITL	·		☐ Change ☐ Addition
NAME			5.2 NAM	!		
STREET ADDRESS				ET ADDRESS		
CITY-ST-ZIP		☐ DELET		- ST - ZIP		Ohanna Takeri
TITLE		ריין טבוננו				☐ Change ☐ Addition
NAME CERTAINDREC			6.2 NAV			
STREET ADDRESS				ET ADDRESS		
CITY-ST-ZIP	ertify that the information supplied	with this filing does not au	alify for the exen	-ST-ZIP   notion stated in !	Section 119.07(3)(i), Florida Statutes. I furthe	er certify that the information
officer or o	on this annual report or supplement	tal annual report is true and beiver or trustee empowers	d accurate and	ihat my signatur	re shall have the same legal effect as if mad vired by Chapter 607, Florida Statutes; and the	a under noth that I am an