2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 16, 2007
Secretary of State

DOCUMENT# K04761

Entity Name: WEAVER GROVES, INC.

Current Principal Place of Business:

1548 NE 34TH STREET
REAR
OAKLAND PARK, FL 33334 US

New Principal Place of Business:

Current Mailing Address:

1548 NE 34TH STREET
REAR
OAKLAND PARK, FL 33334 US

New Mailing Address:

FEI Number: 65-0017846 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WEAVER, JAMES M PRES
1548 NE 34TH STREET
OAKLAND PARK, FL 33334 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: S ( ) Delete
Name: WEAVER, LINDY S
Address: 1534 NE 34TH ST
City-St-Zip: OAKLAND PARK, FL

Title: D ( ) Delete
Name: CMAYLO, BARBARA J
Address: 2640 N.E. 26TH COURT
City-St-Zip: FORT LAUDERDALE, FL 33306

Title: D ( ) Delete
Name: WEAVER, PATRICIA A
Address: 3089 LEE STREET SE
City-St-Zip: SMYRNA, GA 30080

Title: PRES ( ) Delete
Name: WEAVER, JAMES M
Address: 1534 NE 34TH STREET
City-St-Zip: OAKLAND PARK, FL

Title: D ( ) Delete
Name: TOVORNIK, MARY ALICE
Address: 151 BUSBEE STREET
City-St-Zip: CONWAY, SC 29526

Title: VP ( ) Delete
Name: WEAVER, RICHARD S
Address: 3216 CANAL DR APT A
City-St-Zip: POMPANO BEACH, FL 33062

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JAMES M. WEAVER PRES 04/16/2007

Electronic Signature of Signing Officer or Director Date