

CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Bandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 14 1997 8:00am
Secretary of State

DOCUMENT # K12219

(7)

1. Corporation Name

DEYOUNG GROVES, INC.

Principal Place of Business

% LINDA S. DEYOUNG
2225 BUENA VISTA DR
CLEARWATER FL 34624

Mailing Address

% LINDA S. DEYOUNG
2225 BUENA VISTA DR
CLEARWATER FL 34624

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

01/15/1988

3a. Date of Last Report

03/01/1994

4. FBI Number

69-2866451

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. 199.032,
Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

1241 S. Missouri Ave.

2a. Mailing Address

1241 S. Missouri Ave.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Clearwater, FL

City & State

Clearwater, FL

Zip

34616

Country

Zip

34616

Country

9. Name and Address of Current Registered Agent

DEYOUNG, LINDA S.
2225 BUENA VISTA DR
CLEARWATER FL 34624

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

1241 S. Missouri Ave.

83

84 City

Clearwater

FL

85 Zip Code

34616

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

Linda S. DeYoung
Signature, typed or printed name of registered agent and title if applicable.

Linda S. DeYoung, President

AX30X26 4-30-97

DATE

12. OFFICERS AND DIRECTORS

TITLE	VT
NAME	DEYOUNG, CURTIS J.
STREET ADDRESS	2225 BUENA VISTA DR
CITY-ST-ZIP	CLEARWATER-FL-31
TITLE	PS
NAME	DEYOUNG, LINDA S.
STREET ADDRESS	2225 BUENA VISTA DR
CITY-ST-ZIP	CLEARWATER-FL-31
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

1.1 TITLE	DVT	☒ Change ☐ Addition
1.2 NAME		
1.3 STREET ADDRESS	6442 U.S. Hwy 27 So.	
1.4 CITY-ST-ZIP	SEBRING, FL 33870	☒ Change ☐ Addition
2.1 TITLE	DPS	
2.2 NAME		
2.3 STREET ADDRESS	6442 U.S. Hwy 27 So.	
2.4 CITY-ST-ZIP	SEBRING, FL 33870	☐ Change ☐ Addition
3.1 TITLE		
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		☐ Change ☐ Addition
4.1 TITLE		
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		☐ Change ☐ Addition
5.1 TITLE		
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		☐ Change ☐ Addition
6.1 TITLE		
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

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***165.00

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 119.07(3)(b), 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, Block 13, if changing, or on an attachment with an address.

SIGNATURE:

Linda S. DeYoung
Linda S. DeYoung
President

4-30-97

XXXXXX

447-4622

(813) XXXXXXXX