

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 24, 2008 08:00 AM
Secretary of State

DOCUMENT # K96132

1. Entity Name
JARO GROVES, INC.



Principal Place of Business
762 SOUTH US #1
SUITE 267
VERO BEACH, FL 32962 US

Mailing Address
762 SOUTH US #1
SUITE 267
VERO BEACH, FL 32962 US



01052008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2954640

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ROUSE, H. WAYNE
762 SOUTH US #1
SUITE 267
VERO BEACH, FL 32962

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution.

☐ \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	JACOBS, DARYL C
STREET ADDRESS	5235 - 22ND STREET
CITY-ST-ZIP	VERO BEACH, FL 32967
TITLE	D
NAME	JACOBS, DALE L
STREET ADDRESS	3590 11TH ST. S.W.
CITY-ST-ZIP	VERO BEACH, FL 32962
TITLE	D
NAME	ROUSE, H. WAYNE
STREET ADDRESS	762 SOUTH US. #1, SUITE 267
CITY-ST-ZIP	VERO BEACH, FL 32962
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

H Wayne Rouse H. WAYNE ROUSE 1/21/08 772 468-1836