

# **2008 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000083826

Entity Name: ATB GROVE, LLC

**FILED**  
**Mar 27, 2008**  
**Secretary of State**

**Current Principal Place of Business:**

6755 WILSON ROAD  
WEST PALM BEACH, FL 33413

**New Principal Place of Business:**

**Current Mailing Address:**

1540 DONNA ROAD  
WEST PALM BEACH, FL 33409

**New Mailing Address:**

3635 FISCAL COURT  
RIVIERA BEACH, FL 33404

FEI Number: 20-3360817

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BARBIERI, ANTHONY T  
1540 DONNA ROAD  
WEST PALM BEACH, FL 33409 US

**Name and Address of New Registered Agent:**

BARBIERI, ANTHONY T  
3635 FISCAL COURT  
RIVIERA BEACH, FL 33404 US

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:

03/27/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: BARBIERI, ANTHONY T  
Address: 6755 WILSON ROAD  
City-St-Zip: WEST PALM BEACH, FL 33413

**ADDITIONS/CHANGES:**

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: ANTHONY BARBIERI

MGRM

03/27/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date