

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000044335

Entity Name: M. R. B GROVES L.L.C.

**FILED**  
**Apr 29, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

900 MEMORIAL DRIVE  
AVON PARK, FL 33825 US

**New Principal Place of Business:**

**Current Mailing Address:**

900 MEMORIAL DRIVE  
AVON PARK, FL 33825 US

**New Mailing Address:**

FEI Number: 45-1631118

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BROWN, JAMES K  
900 MEMORIAL DRIVE  
AVON PARK, FL 33825 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

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: BROWN, JAMES K  
Address: 900 MEMORIAL DRIVE  
City-St-Zip: AVON PARK, FL 33825 US

Title: MGRM  
Name: BROWN, GEORGE D  
Address: 10 ARAGON AVE, APT. 1406  
City-St-Zip: CORAL GABLES, FL 33174 US

Title: MGRM  
Name: BROWN, JONATHAN O  
Address: 5792 N.W. SCOUT AVENUE  
City-St-Zip: ARCADIA, FL 34266 US

Title: MGRM  
Name: ALSABROOK, JANET R  
Address: 2109 STATE ROAD 62  
City-St-Zip: BOWLING GREEN, FL 33834

Title: MGRM  
Name: WATSON, SUSAN M  
Address: 148 BAILEY ROAD  
City-St-Zip: WAUCHULA, FL 33873

I hereby 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: JAMES KEVIN BROWN

MGRM

04/29/2012

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