## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# M73859

City-St-Zip:

FILED Jan 25, 2007 Secretary of State

Entity Name: MARK WHEELER GROVES, INC.							
Current Principal Place of Business:				New Principal Place of Business:			
141 EAST SUITE 450	CENTRAL AVI	ENUE					
	HAVEN, FL 33	880 US					
Current Mailing Address:				New Mailing Address:			
PO BOX 1: WINTER H	396 HAVEN, FL 338	882 US					
FEI Number: 59-2882823 FEI Number Applied For ( )				FEI Number Not Applicable ( ) Certificate of Status Desired ( )			
Name and	Address of C	urrent Registe	ered Agent:	Name and	Address of	New Registered Agent:	
141 E. CEI SUITE 450	R, I. WESTON NTRAL AVENU HAVEN, FL 338						
The above in the State	named entity s e of Florida.	submits this sta	tement for the pu	urpose of changing i	ts registered	office or registered agent	i, or both,
SIGNATUR	RE:						
	Electron	ic Signature of	Registered Ager	nt		Date	
Election Car	npaign Financing	Trust Fund Con	tribution ( ).				
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	PD () WHEELER, IRV 1950 LAKE ELC WINTER HAVEN	DISE DRIVE N		Title: Name: Address: City-St-Zip:	WHEELER, II PO BOX 2796		
Title: Name: Address: City-St-Zip:	SD () WHEELER, DAY PO BOX 2573 LAKE PLACID,			Title: Name: Address: City-St-Zip:	PSD ( WHEELER, D PO BOX 257: LAKE PLACID	3	
Title: Name: Address: City-St-Zip:	VD () WHEELER, JAN 179 HUNTLEY ( LAKE PLACID,	DAKS BLVD.		Title: Name: Address: City-St-Zip:	VD ( WHEELER, J PO BOX 271: LAKE PLACIE	5	
Title: Name: Address: City-St-Zip:	WHEELER, I. W 141 E. CENTRA	Delete VESTON NL AVENUE, #450 N, FL 33880 US		Title: Name: Address: City-St-Zip:	WHEELER, I. PO BOX 1396		
Title: Name: Address:	( )	Delete		Title: Name: Address:	D ( MAIER, SALL PO BOX 2790		

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.

City-St-Zip:

SIGNATURE: I. WESTON WHEELER T 01/25/2007

WINTER HAVEN, FL 33883