

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED
May 21 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Bandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # M86487 (9)

1. Corporation Name
WHITE'S GROVES, INC.



Principal Place of Business % HARRY E. WHITE 1560 PALM PLACE BARTOW FL 33830	Mailing Address % HARRY E. WHITE 1560 PALM PLACE BARTOW FL 33830-7229
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3. Date Incorporated or Qualified 06/22/1988	3a. Date of Last Report 02/29/1996
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2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
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4. FEI Number 59-2903543	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**WHITE, HARRY E.
 1560 PALM PLACE
 BARTOW FL 33830**

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS

TITLE	DP	<input type="checkbox"/> DELETE
NAME	WHITE, HARRY E.	
STREET ADDRESS	1560 PALM PLACE	
CITY-ST-ZIP	BARTOW FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	WHITE, JOHN B., JR.	
STREET ADDRESS	405 RIVERHILL DRIVE	
CITY-ST-ZIP	ATLANTA GA	
TITLE	DS	<input type="checkbox"/> DELETE
NAME	WHITE, DAVID E.	
STREET ADDRESS	124 MOCKINGBIRD DRIVE	
CITY-ST-ZIP	AMERICUS GA	
TITLE	DVP	<input type="checkbox"/> DELETE
NAME	WHITE, JOHN H.	
STREET ADDRESS	1790 SHAWNEE TRAIL	
CITY-ST-ZIP	MAITLAND FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 or Block 13 if changed, or in an attachment with an address.

SIGNATURE: *[Signature]* **REQUIRED** Date: **4/28/97** (904) 533-1395 Daytime Phone #

CR2E034 (9/96)

WRIGHT, WALKER & COMPANY, P.A.

Steven R. Wright, C.P.A.
Jeffrey R. Walker, C.P.A.
Johnna C. Eady, C.P.A.
Robin A. Rahman, C.P.A.
Frances V. Sampson, C.P.A.
Keightley G. Stringfellow, C.P.A.

Certified Public Accountants
Bartow — 941-533-7191
Winter Haven — 941-299-6815
Fax — 941-533-0259

P.O. Drawer 569
550 East Davidson St.
Bartow, Florida 33830

May 14, 1997

Division of Corporations
Annual Reports Section
P.O. Box 1500
Tallahassee, FL 32302-1500

RE: White's Groves, Inc.
59-2903543

Gentlemen:

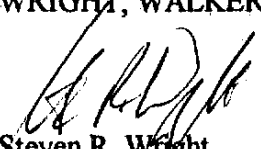
Enclosed please find the 1997 Corporate Annual Report for the above-referenced taxpayer, along with a check in the amount of \$165.00. Please note that the report was timely completed and the check written prior to May 1, 1997. However, the report and the check were inadvertently misplaced in the wrong file by our office, and thus, they did not get mailed in a timely manner.

We apologize for the delay caused by our error, and respectfully request that any penalties be waived.

Thank you for your cooperation. Should you have any questions, please do not hesitate to contact us.

Very Truly Yours,

WRIGHT, WALKER & COMPANY, P.A.


Steven R. Wright

SRW:dlw