

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000006486

FILED  
Apr 27, 2005  
Secretary of State

Entity Name: GROVE HOUSE SUPPORTIVE SERVICES, INC.

## Current Principal Place of Business:

2700 UNIVERSITY BOULEVARD WEST  
#A1  
JACKSONVILLE, FL 32217

## New Principal Place of Business:

## Current Mailing Address:

2700 UNIVERSITY BOULEVARD WEST  
#A1  
JACKSONVILLE, FL 32217

## New Mailing Address:

FEI Number: 20-0137227

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CURLEY, CHARLES R JR  
1301 RIVERPLACE BOULEVARD  
SUITE 1500  
JACKSONVILLE, FL 322173220 US

## Name and Address of New Registered Agent:

GOODRICH, JEFF D  
1850 UNIVERSITY BLVD SOUTH  
JACKSONVILLE, FL 32216 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: JEFFERY D. GOODRICH

04/27/2005

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: MOORE, PAUL T  
Address: 2098 ORANGE PICKERS ROAD  
City-St-Zip: JACKSONVILLE, FL 32223

Title: VP ( ) Delete  
Name: DAVIS, BRANCH  
Address: 5958 SAXONY WOODS LANE  
City-St-Zip: JACKSONVILLE, FL 32211

Title: T (X) Delete  
Name: TRETINA, MIKE  
Address: 1800 BURRS ST.  
City-St-Zip: JACKSONVILLE, FL 32204

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: DAVIS, BRANCH  
Address: 5958 SAXONY WOODS LANE  
City-St-Zip: JACKSONVILLE, FL 32211

Title: VP (X) Change ( ) Addition  
Name: SNYDER, LAUREN  
Address: 8243 SHADY GROVE LANE  
City-St-Zip: JACKSONVILLE, FL 32256

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BRANCH DAVIS

P

04/27/2005

Electronic Signature of Signing Officer or Director

Date