

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000037694

**FILED**  
**Feb 12, 2009**  
**Secretary of State**

**Entity Name:** LANG SUN COUNTRY GROVES, INC.

**Current Principal Place of Business:**

5900 HWY. 17-92  
LAKE ALFRED, FL 33850

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 1302  
LAKE ALFRED, FL 33850

**New Mailing Address:**

**FEI Number:** 59-3717862

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WRIGHT, STEVE R  
154 AVE H SE  
SUITE 1  
WINTER HAVEN, FL 33880 US

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

GREEN, PAM  
1104 CYPRESS GARDENS BLVD  
SUITE D  
WINTER HAVEN, FL 33884 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:** PAM GREEN

02/12/2009

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** P ( ) Delete  
**Name:** BROZIO, DEBBIE  
**Address:** P.O. BOX 1302 (5900 HWY 17-92)  
**City-St-Zip:** LAKE ALFRED, FL 338301302

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

**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 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.

**SIGNATURE:** DEBBIE BROZIO

P

02/12/2009

Electronic Signature of Signing Officer or Director

Date