

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000085016

Entity Name: B & B GROVE SERVICES, INC.

FILED  
Apr 20, 2008  
Secretary of State

## Current Principal Place of Business:

26475 LOBLOLLY BAY RD.  
LABELLE, FL 33935

## New Principal Place of Business:

## Current Mailing Address:

26475 LOBLOLLY BAY RD  
LABELLE, FL 33935

## New Mailing Address:

FEI Number: 65-1134387

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BERDEN, NOREEN  
26475 LOBLOLLY BAY RD.  
LABELLE, FL 33935 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: BERDEN, NOREEN  
Address: 26475 LOBLOLLY BAY RD.  
City-St-Zip: LABELLE, FL 33935

Title: V ( ) Delete  
Name: BERDEN, DALE  
Address: 26475 LOBLOLLY BAY RD.  
City-St-Zip: LABELLE, FL 33935

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: DALE BERDEN

V

04/20/2008

Electronic Signature of Signing Officer or Director

Date