2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2009
Secretary of State

DOCUMENT# P01000085016

Entity Name: B & B GROVE SERVICES, INC.

Current Principal Place of Business:

26475 LOBLOLLY BAY RD.
LABELLE, FL 33935

New Principal Place of Business:

4499 LOBLOLLY BAY RD.
LABELLE, FL 33935

Current Mailing Address:

26475 LOBLOLLY BAY RD
LABELLE, FL 33935

New Mailing Address:

4499 LOBLOLLY BAY RD
LABELLE, FL 33935

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:

BERDEN, NOREEN
4499 LOBLOLLY BAY RD.
LABELLE, FL 33935 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: NOREEN BERDEN 04/29/2009
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: D (X) Change ( ) Addition
Name: BERDEN, NOREEN
Address: 4499 LOBLOLLY BAY RD.
City-St-Zip: LABELLE, FL 33935

Title: V (X) Change ( ) Addition
Name: BERDEN, DALE
Address: 4499 LOBLOLLY BAY RD.
City-St-Zip: LABELLE, FL 33935

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: NOREEN BERDEN D 04/29/2009
Electronic Signature of Signing Officer or Director Date