

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 18, 2008 08:00 A
Secretary of State

DOCUMENT # P02000128022

1. Entity Name
RIVER GROVE ENTERPRISES, INC.



Principal Place of Business
**9130 CENTRAL AVE
MICCO, FL 32976**

Mailing Address
**9130 CENTRAL AVE
MICCO, FL 32976**



04082008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
01-0751102

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**BASS, RICHARD
6704 BROOKLINE AVE
FT PIERCE, FL 34951**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

U000000905416
05/01/08-20054-002 150.00

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	DOUGLAS, MICHAEL D
STREET ADDRESS	9130 CENTRAL AVE
CITY-ST-ZIP	MICCO, FL 32976
TITLE	V
NAME	DOUGLAS, CHARLES S
STREET ADDRESS	9130 CENTRAL AVE
CITY-ST-ZIP	MICCO, FL 32976
TITLE	T
NAME	DOUGLAS, DEBRA K
STREET ADDRESS	9130 CENTRAL AVE
CITY-ST-ZIP	MICCO, FL 32976
TITLE	S
NAME	DOUGLAS, SANDRA J
STREET ADDRESS	9130 CENTRAL AVE
CITY-ST-ZIP	MICCO, FL 32976
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Jordan J. Douglas*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-8-08 772-664-9190
Date Daytime Phone #