2006 FOR PROFIT CORPORATION

FILED Apr 14, 2006 08:00 AM

| DOCUMENT # P03000003018 1. Entity Name SCHARBER GROVE, INC. | |
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| Principal Place of Business Mailing Address | |
| 7323 GRIFFIN ROAD 20 SOUTH BROAD STREET BROOKSVILLE, FL 34601 BROOKSVILLE, FL 34601 | |
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| 03232006 No Chg-P CR2E034 (1 | 1/05) |
| DO NOT WRITE IN THIS SPACE | Applied Far |
| 4. FEI Number 13-4230459 | Not Applicab |
| | 5 Additional equired |
| Name and Address of Current Registered Agent | |
| HOGAN, THOMAS S JR. 20 SOUTH BROAD STREET DO NOT WRITE | 4.* |
| BROOKSVILLE, FL 34601 IN THIS SPACE | |
| IN THIS SPACE | |
| | |
| 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 familia the obligations of registered agent. | |
| SIGNATURE James W Schat 4/13/3 | 004 |
| CAUCASIVE broad or critisal narms of constant and title if additionable fill file flavores and trace constant required when released to the constant in the co | |
| Anginature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent agrature required when reinstating) | |
| FILE NOWILI FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. The Registered Agent signature required when rehissating) 9. Election Campaign Financing Trust Fund Contribution. Added to Fees | |
| FILE NOWILI FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Added to Fees 10. OFFICERS AND DIRECTORS | |
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| State Stat | 6 150.00 ans |
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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 afficer 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.

STREET ADDRESS C17Y-57-ZIP

SIGNATURE: James W Scharter SIGNING OFFICER OR DIRECTOR