


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 28, 2005 8:00 am
Secretary of State

03-28-2005 90044 010 ***150.00

DOCUMENT # P03000026412 1. Entity Name TWENTY-TWENTY GROVES, INC.					
Principal Place of Business 2195 N. KINGS HIGHWAY FORT PIERCE, FL 34951			Mailing Address P.O. BOX 12190 FORT PIERCE, FL 34947		
2. Principal Place of Business 582 Beachland Blvd Suite, Apt. #, etc. Suite 300 City & State Vero Beach, FL Zip 32963		3. Mailing Address 582 Beachland Blvd Suite, Apt. #, etc. Suite 300 City & State Vero Beach, FL Zip 32963			
Country USA		Country USA		4. FEI Number 31-1819413 Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				01282005 Chg-P CR2E034 (10/03)	
6. Name and Address of Current Registered Agent NEILL, RICHARD V JR. 311 S. 2ND STREET FORT PIERCE, FL 34950			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
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 _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BECKER, WILLIAM 2195 N. KINGS HWY FORT PIERCE, FL 34951		TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Becker, William 532 Beachland Blvd #300 Vero Beach, FL 32963	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD PLYMALE, BART 2195 N. KINGS HWY FORT PIERCE, FL 34951		TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD Plymale, Bart 532 Beachland Blvd #300 Vero Beach, FL 32963	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD PANTUSO, GEORGE PO BOX 14049 FORT PIERCE, FL 34979		TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPTD Taylor, Andrew 532 Beachland Blvd #300 Vero Beach, FL 32963	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPTD TAYLOR, ANDREW 2195 N KINGS HWY FORT PIERCE, FL 34951		TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPTD Taylor, Andrew 532 Beachland Blvd #300 Vero Beach, FL 32963	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPTD TAYLOR, ANDREW 2195 N KINGS HWY FORT PIERCE, FL 34951		TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPTD Taylor, Andrew 532 Beachland Blvd #300 Vero Beach, FL 32963	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPTD TAYLOR, ANDREW 2195 N KINGS HWY FORT PIERCE, FL 34951		TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPTD Taylor, Andrew 532 Beachland Blvd #300 Vero Beach, FL 32963	
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: _____ SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			George Pantuso Date 3/24/05 Daytime Phone # 772-461-8868		