

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 10, 2004 8:00 am
Secretary of State

03-10-2004 90031 025 ***150.00

DOCUMENT # P03000156028

1. Entity Name

DOUBLE K GROVES, INC.



Principal Place of Business

5423 KENMORE LANE
ORLANDO FL 32839

Mailing Address

5423 KENMORE LANE
ORLANDO FL 32839

2. Principal Place of Business

700 E. Sandpiper St.

3. Mailing Address

P. O. Box 1010

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Apopka, FL

City & State

Apopka, FL

Zip

32712

Country

USA

Zip

32704

Country

USA

4. FEI Number

Applied For

☒ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

DAVIS, CHARLES E
5423 KENMORE LANE
ORLANDO FL 32839

7. Name and Address of New Registered Agent

Name George G. McClure

Street Address (P.O. Box Number is Not Acceptable)
700 E. Sandpiper St.

City

Apopka

FL

Zip Code

32712

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

George G. McClure

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2004 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE President ☐ Delete
NAME George G. McClure
STREET ADDRESS 700 E. Sandpiper St.
CITY-ST-ZIP Apopka, FL 32712

TITLE Vice President ☐ Delete
NAME John Peter McClure
STREET ADDRESS 700 E. Sandpiper St.
CITY-ST-ZIP Apopka, FL 32712

TITLE Secretary ☐ Delete
NAME Patricia A. Posey
STREET ADDRESS 700 E. Sandpiper St.
CITY-ST-ZIP Apopka, FL 32712

TITLE Treasurer ☐ Delete
NAME Nancy B. McClure
STREET ADDRESS 700 E. Sandpiper St.
CITY-ST-ZIP Apopka, FL 32712

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

George G. McClure
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/3/04 407-889-2134
Date Daytime Phone #