

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000156028

Entity Name: DOUBLE K GROVES, INC.

FILED  
Apr 17, 2007  
Secretary of State

## Current Principal Place of Business:

700 E. SANDPIPER ST.  
APOPKA, FL 32712

## New Principal Place of Business:

1996 TOURNAMENT DR.  
APOPKA, FL 32712

## Current Mailing Address:

PO BOX 1010  
APOPKA, FL 32704

## New Mailing Address:

1996 TOURNAMENT DR.  
APOPKA, FL 32712

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MCCLURE, GEORGE G  
700 E. SANDPIPER ST.  
APOPKA, FL 32712 US

## Name and Address of New Registered Agent:

MCCLURE, JOHN PETER  
5325 SUMMERLIN RD.  
PORT ST. LUCIE, FL 34987 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: JOHN PETER MCCLURE

04/17/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: MCCLURE, GEORGE G  
Address: 700 E. SANDPIPER ST.  
City-St-Zip: APOPKA, FL 32712

Title: VP ( ) Delete  
Name: MCCLURE, JOHN PETER  
Address: 700 E. SANDPIPER ST.  
City-St-Zip: APOPKA, FL 32712

Title: S ( ) Delete  
Name: POSEY, PATRICIA A  
Address: 700 E. SANDPIPER ST.  
City-St-Zip: APOPKA, FL 32712

Title: T (X) Delete  
Name: MCCLURE, NANCY B  
Address: 700 E. SANDPIPER ST.  
City-St-Zip: APOPKA, FL 32712

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/D (X) Change ( ) Addition  
Name: MCCLURE, JOHN PETER  
Address: 5325 SUMMERLIN RD.  
City-St-Zip: PORT ST. LUCIE, FL 34987

Title: VP/T (X) Change ( ) Addition  
Name: MCCLURE, NANCY B  
Address: 1996 TOURNAMENT DR.  
City-St-Zip: APOPKA, FL 32712

Title: S (X) Change ( ) Addition  
Name: POSEY, PATRICIA A  
Address: 1996 TOURNAMENT DR.  
City-St-Zip: APOPKA, FL 32712

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: JOHN PETER MCCLURE

P/D

04/17/2007

Electronic Signature of Signing Officer or Director

Date