

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 8, 1998.
AMOUNT DUE ON OR BEFORE 8/8/98: \$225 (IF DISSOLVED, UNPAID AMOUNT DUE TO REINSTATE: \$275)

PROFIT
CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

FILED

95 JUL 10 AM 9:53

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000007327 (8)

1. Corporation Name

GROVE PROPERTY INVESTMENTS, INC.

Principal Place of Business

8875 ORANGE BLOSSOM DRIVE N.
SEMINOLE FL 34643

Mailing Address

8875 ORANGE BLOSSOM DRIVE N.
SEMINOLE FL 34643

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

01/28/1993

3a. Date of Last Report

09/09/1994

2. Principal Place of Business

21 Suite, Apt. #, etc.

2a. Mailing Address

28 Suite, Apt. #, etc.

4. FBI Number

50-0161498

Applied For

Not Applicable

5. Certificate of Status Desired

\$0.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐ Yes ☒ No

9. Name and Address of Current Registered Agent

GROVE, UTA S
ONE PROGRESS PLAZA
STE 1210
ST. PETERSBURG FL 33731

10. Name and Address of New Registered Agent

81 Name Grove, Uta S.
82 Street Address (P.O. Box Number is Not Acceptable)
520 4th Street North
83 City
84 St. Petersburg FL 85 Zip Code 33701

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Uta S. Grove

(NOTE: Registered Agent signature required when reinstating)

DATE

7/1/95

12. OFFICERS AND DIRECTORS

TITLE POST
NAME GROVE, DAVID R
STREET ADDRESS 8875 ORANGE BLOSSOM DRIVE N
CITY- ST- ZIP SEMINOLE FL 34643

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY- ST- ZIP
2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY- ST- ZIP
3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY- ST- ZIP
4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY- ST- ZIP
5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY- ST- ZIP
6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY- ST- ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

David R. Grove

David R. Grove, President 7/1/95 (813) 397-8052

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone