FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT

1995

APPROVED AND FILED

95 MAY -1 PM 11:22

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000007092 (7)

1. DEMARCO & GROVE, INC.

Principal Place of Business	Mailing Address
2862 GULF TO BAY BLVD	2862 GULF TO BAY BLVD
CLEARWATER FL	CLEARWATER FL

3. Date Incorporated or Qualified: 01/28/1994

4. FEI Number: 59-3220644

5. Certificate of Status Desired ☐ — $8.75 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

2. Principal Place of Business / 2a. Mailing Address

22 Suite E

24 34619

9. Name and Address of Current Registered Agent

CORPORATION INFORMATION SERVICES INC.
1201 HAYS ST.
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81 Name: Thomas C. Nash
82 Street Address (P.O. Box Number is Not Acceptable): 400 Cleveland St
83 8th Floor
84 City: Clearwater FL 85 Zip Code: 34615

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 [signature] Thomas C. Nash 4-26-95

12. OFFICERS AND DIRECTORS

Title	Name / Address
DP	GROVE, JAMES G 3314 SAN CARLOS DR. CLEARWATER FL 34619
DT	GROVE, VIRGINIA L 3314 SAN CARLOS DR. CLEARWATER FL 34619
DV	DEMARCO, ANTHONY E 2841 LONGLEAF LANE PALM HARBOR FL 34684
DS	DEMARCO, DEBRA J 2841 LONGLEAF LANE PALM HARBOR FL 34684

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS

☐ Change ☐ Addition

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07, 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE [signature] James G. Grove 4-27-95 813-797-9027

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0356618 CP