

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 11, 2000 8:00 am
Secretary of State

02-11-2000 90014 009 ***150.00

DOCUMENT # P95000011043

1. Entity Name
BLACK DOG GROVES, INC.

Principal Place of Business Mailing Address
5004 RIVERVIEW BLVD. WEST **5004 RIVERVIEW BLVD. WEST**
BRADENTON FL 34209 **BRADENTON FL 34209-1940**

2. Principal Place of Business 3. Mailing Address
11708 Fruitville Rd **11708 Fruitville Rd**
 Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State
Sarasota Fl. **Sarasota Fl.**

Zip Country Zip Country
34240 **USA** **34240** **USA**



DO NOT WRITE IN THIS SPACE

4. FEI Number **65-0556348** Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent
TURNER, RICHARD E
5004 RIVERVIEW BLVD. WEST
BRADENTON FL 34209

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.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	VPDS TURNER, RICHARD E JR 5020 RIVERVIEW BOULEVARD WEST BRADENTON FL 34209	TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	VPD TURNER, JAY F 4846 2ND AVENUE DR NW BRADENTON, FL 34209	TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	VPD TURNER, BRIAN H 5004 RIVERVIEW BOULEVARD WEST BRADENTON FL 34209	TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	PT TURNER, RICHARD E SR 5004 RIVERVIEW BOULEVARD WEST BRADENTON FL 34209	TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE		TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE		TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Richard E Turner Jr Date: 2/7/00 Daytime Phone #: 941 704-22